

Sub Screen: Award: 367771

54	Sub-Recipient Organization (Awardee)*	MiBroadband LLC-T185MIBRO
55	Award Number*	367771
56	Award Payment Method*	Reimbursable
57	Amount of Award *	\$0.00
58	Award Date *	09/03/2020
59	Period of Performance Start Date *	09/03/2020
60	Period of Performance End Date *	07/01/2021
61	Primary Place of Performance Address Line 1 *	35 1st Ave NE
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Harmony
65	Primary Place of Performance State Code *	MN
66	Primary Place of Performance Zip+4 *	55939-1209
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	To provide broadband services to the vendors area of service.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-185-00BB - Broadband Grants	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$0.00	\$00	\$0.00

Previous Expenditures (All previous quarters)

72 A	72 B	72 C	72 D	72 E
Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Total:				\$00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A		75 B	75 C	75 D	75 E	
	Project*		Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 367902

54	Sub-Recipient Organization (Awardee)*	Miles Communications LLC-2107974MI
55	Award Number*	367902
56	Award Payment Method*	Reimbursable
57	Amount of Award *	\$466,122.89
58	Award Date *	02/10/2021
59	Period of Performance Start Date *	02/10/2021
60	Period of Performance End Date *	07/01/2021
61	Primary Place of Performance Address Line 1 *	342 Ferry Rd
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Miles
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52064-4400
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	To provide broadband services to the vendors area of service.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-185-00BB - Broadband Grants	\$00	\$466,122.89	\$00	\$233,025.14
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$466,122.89	\$00	\$233,025.14

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-185-00BB - Broadband Grants	02/10/2021 02/10/2021	\$233,025.14	Facilitating Distance Learning	
Total:					\$233,025.14

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 368371

54	Sub-Recipient Organization (Awardee)*	Minburn Telecommunications, Inc.-2124456MI
55	Award Number*	368371
56	Award Payment Method*	Reimbursable
57	Amount of Award *	\$0.00
58	Award Date *	09/01/2020
59	Period of Performance Start Date *	09/01/2020
60	Period of Performance End Date *	07/01/2021
61	Primary Place of Performance Address Line 1 *	100 S Main St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Woodward
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50276-7707
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	To provide broadband services to the vendors area of service.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-185-00BB - Broadband Grants	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$0.00	\$00	\$0.00

Previous Expenditures (All previous quarters)

72 A	72 B	72 C	72 D	72 E
Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Total:				\$00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 368355

54	Sub-Recipient Organization (Awardee)*	Minburn Telephone Company-3075913MI
55	Award Number*	368355
56	Award Payment Method*	Reimbursable
57	Amount of Award *	\$0.00
58	Award Date *	09/01/2020
59	Period of Performance Start Date *	09/01/2020
60	Period of Performance End Date *	07/01/2021
61	Primary Place of Performance Address Line 1 *	416 Chestnut St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Minburn
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50167-1003
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	To provide broadband services to the vendors area of service.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-185-00BB - Broadband Grants	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$0.00	\$00	\$0.00

Previous Expenditures (All previous quarters)

72 A	72 B	72 C	72 D	72 E
Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Total:				\$00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 368074

54	Sub-Recipient Organization (Awardee)*	NEIT Services, LLC-T185NEITS
55	Award Number*	368074
56	Award Payment Method*	Reimbursable
57	Amount of Award *	\$199,184.77
58	Award Date *	02/29/2020
59	Period of Performance Start Date *	03/01/2020
60	Period of Performance End Date *	09/30/2021
61	Primary Place of Performance Address Line 1 *	800 S Main St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Monona
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52159-8039
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	To provide broadband services to the vendors area of service.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-185-00BB - Broadband Grants	\$0.00	\$199,184.77	\$99,592.39	\$199,184.77
Total		\$0.00	\$199,184.77	\$99,592.39	\$199,184.77

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-185-00BB - Broadband Grants	12/01/2020 12/01/2020	\$99,592.38	Facilitating Distance Learning	
Total:					\$99,592.38

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category DescriptionDelete
Line 1	IA-185-00BB - Broadband Grants	08/23/2021	08/23/2021	\$99,592.39	Facilitating Distance Learning	
Total:				\$99,592.39		

Sub Screen: Award: 368406

54	Sub-Recipient Organization (Awardee)*	Night Owl, Wireless-T185NIGHT
55	Award Number*	368406
56	Award Payment Method*	Reimbursable
57	Amount of Award *	\$379,746.60
58	Award Date *	02/29/2020
59	Period of Performance Start Date *	03/01/2020
60	Period of Performance End Date *	07/01/2021
61	Primary Place of Performance Address Line 1 *	521 N Main St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Walcott
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52773-8500
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	To provide broadband services to the vendors area of service.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-185-00BB - Broadband Grants	\$00	\$379,746.60	\$00	\$174,500.00
Total		\$00	\$379,746.60	\$00	\$174,500.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-185-00BB - Broadband Grants	12/18/2020 12/18/2020	\$174,500.00	Facilitating Distance Learning	
Total:					\$174,500.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 367725-368361

54	Sub-Recipient Organization (Awardee)*	Northwest Communications Cooperative Association-2117141NO	
55	Award Number*	367725-368361	
56	Award Payment Method*	Reimbursable	
57	Amount of Award *		\$304,743.00
58	Award Date *	09/08/2020	
59	Period of Performance Start Date *	09/08/2020	
60	Period of Performance End Date *	09/30/2021	
61	Primary Place of Performance Address Line 1 *	844 Wood St	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Havelock	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50546-7593	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	4	
70	Award Description *	To provide broadband services to the vendors area of service.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-185-00BB - Broadband Grants	\$0.00	\$304,743.00	\$227,701.23	\$227,701.23
Total		\$0.00	\$304,743.00	\$227,701.23	\$227,701.23

Previous Expenditures (All previous quarters)

72 A	72 B	72 C	72 D	72 E
Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Total:				\$00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	IA-185-00BB - Broadband Grants	07/13/2021 08/23/2021	\$227,701.23	Facilitating Distance Learning		
Total:					\$227,701.23	

Sub Screen: Award: 367423-367572-367585-367596

54	Sub-Recipient Organization (Awardee)*	Omnitel Communications, Inc.-2132646OM
55	Award Number*	367423-367572-367585-367596
56	Award Payment Method*	Reimbursable
57	Amount of Award *	\$204,560.00
58	Award Date *	02/15/2021
59	Period of Performance Start Date *	02/15/2021
60	Period of Performance End Date *	09/30/2021
61	Primary Place of Performance Address Line 1 *	608 E Congress St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Nora Springs
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50458-8634
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide broadband services to the vendors area of service.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-185-00BB - Broadband Grants	\$0.00	\$204,560.00	\$50,169.46	\$165,882.22
Total		\$0.00	\$204,560.00	\$50,169.46	\$165,882.22

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-185-00BB - Broadband Grants	02/15/2021 03/02/2021	\$115,712.76	Facilitating Distance Learning	
Total:					\$115,712.76

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category DescriptionDelete
Line 1	IA-185-00BB - Broadband Grants	08/06/2021	08/06/2021	\$50,169.46	Facilitating Distance Learning	
Total:				\$50,169.46		

Sub Screen: Award: 368407

54	Sub-Recipient Organization (Awardee)*	Osage Municipal Utilities-21301100S
55	Award Number*	368407
56	Award Payment Method*	Reimbursable
57	Amount of Award *	\$314,240.23
58	Award Date *	09/15/2020
59	Period of Performance Start Date *	09/15/2020
60	Period of Performance End Date *	09/30/2021
61	Primary Place of Performance Address Line 1 *	720 Chestnut St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Osage
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50461-1462
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	To provide broadband services to the vendors area of service.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-185-00BB - Broadband Grants	\$0.00	\$314,240.23	\$157,120.11	\$157,120.11
Total		\$0.00	\$314,240.23	\$157,120.11	\$157,120.11

Previous Expenditures (All previous quarters)

72 A	72 B	72 C	72 D	72 E
Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Total:				\$00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description Delete
Line 1	IA-185-00BB - Broadband Grants	07/02/2021	07/02/2021	\$157,120.11	Facilitating Distance Learning	
Total:				\$157,120.11		

Sub Screen: Award: 367583

54	Sub-Recipient Organization (Awardee)*	Reinbeck Telecommunications-T185REINB
55	Award Number*	367583
56	Award Payment Method*	Reimbursable
57	Amount of Award *	\$51,400.00
58	Award Date *	09/22/2020
59	Period of Performance Start Date *	09/22/2020
60	Period of Performance End Date *	12/30/2020
61	Primary Place of Performance Address Line 1 *	414 Main St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Reinbeck
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50669-1050
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide broadband services to the vendors area of service.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-185-00BB - Broadband Grants	\$00	\$51,400.00	\$00	\$0.00
Total		\$00	\$51,400.00	\$00	\$0.00

Previous Expenditures (All previous quarters)

72 A	72 B	72 C	72 D	72 E
Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Total:				\$00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A		75 B	75 C	75 D	75 E	
	Project*		Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 368167

54	Sub-Recipient Organization (Awardee)*	River Valley Telecommunications Cooperative-2110010RI
55	Award Number*	368167
56	Award Payment Method*	Reimbursable
57	Amount of Award *	\$85,364.30
58	Award Date *	09/01/2020
59	Period of Performance Start Date *	09/01/2020
60	Period of Performance End Date *	12/30/2020
61	Primary Place of Performance Address Line 1 *	106 E Robins St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Graettinger
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51342-7726
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide broadband services to the vendors area of service.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-185-00BB - Broadband Grants	\$00	\$85,364.30	\$00	\$0.00
Total		\$00	\$85,364.30	\$00	\$0.00

Previous Expenditures (All previous quarters)

72 A	72 B	72 C	72 D	72 E
Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Total:				\$00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 368388

54	Sub-Recipient Organization (Awardee)*	Rockwell Cooperative Telephone Association-T185ROCKW	
55	Award Number*	368388	
56	Award Payment Method*	Reimbursable	
57	Amount of Award *		\$1,561,428.01
58	Award Date *	02/11/2021	
59	Period of Performance Start Date *	02/11/2021	
60	Period of Performance End Date *	07/01/2021	
61	Primary Place of Performance Address Line 1 *	111 4th St N	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Rockwell	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50469-7714	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	4	
70	Award Description *	To provide broadband services to the vendors area of service.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-185-00BB - Broadband Grants	\$00	\$1,561,428.01	\$00	\$751,389.00
Total		\$00	\$1,561,428.01	\$00	\$751,389.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-185-00BB - Broadband Grants	02/11/2021 02/11/2021	\$751,389.00	Facilitating Distance Learning	
Total:					\$751,389.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
Total:						\$00

Sub Screen: Award: 367778

54	Sub-Recipient Organization (Awardee)*	Router12 Networks LLC-T185ROUTE
55	Award Number*	367778
56	Award Payment Method*	Reimbursable
57	Amount of Award *	\$69,666.09
58	Award Date *	09/14/2020
59	Period of Performance Start Date *	09/14/2020
60	Period of Performance End Date *	12/30/2020
61	Primary Place of Performance Address Line 1 *	402 19th St SW
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Mason City
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50401-6435
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide broadband services to the vendors area of service.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-185-00BB - Broadband Grants	\$00	\$69,666.09	\$00	\$0.00
Total		\$00	\$69,666.09	\$00	\$0.00

Previous Expenditures (All previous quarters)

72 A	72 B	72 C	72 D	72 E
Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Total:				\$00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 366995

54	Sub-Recipient Organization (Awardee)*	South Slope Telephone Company-2108250SO	
55	Award Number*	366995	
56	Award Payment Method*	Reimbursable	
57	Amount of Award *		\$1,143,550.00
58	Award Date *	04/16/2021	
59	Period of Performance Start Date *	04/16/2021	
60	Period of Performance End Date *	12/01/2021	
61	Primary Place of Performance Address Line 1 *	980 N Front St	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	North Liberty	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52317-9005	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	2	
70	Award Description *	To provide broadband services to the vendors area of service.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-185-00BB - Broadband Grants	\$0.00	\$1,143,550.00	\$1,143,550.00	\$1,143,550.00
Total		\$0.00	\$1,143,550.00	\$1,143,550.00	\$1,143,550.00

Previous Expenditures (All previous quarters)

72 A	72 B	72 C	72 D	72 E
Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Total:				\$00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-185-00BB - Broadband Grants	08/06/2021	08/06/2021	\$1,143,550.00	Facilitating Distance Learning	
Total:						\$1,143,550.00

Sub Screen: Award: 367925

54	Sub-Recipient Organization (Awardee)*	United States Cellular Corporation-T185UNITE	
55	Award Number*	367925	
56	Award Payment Method*	Reimbursable	
57	Amount of Award *	\$5,212,278.84	
58	Award Date *	01/15/2021	
59	Period of Performance Start Date *	01/15/2021	
60	Period of Performance End Date *	07/01/2021	
61	Primary Place of Performance Address Line 1 *	8410 W Bryn Mawr Ave	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Chicago	
65	Primary Place of Performance State Code *	IL	
66	Primary Place of Performance Zip+4 *	60631-3408	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *		
70	Award Description *	To provide broadband services to the vendors area of service.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-185-00BB - Broadband Grants	\$00	\$5,212,278.84	\$00	\$2,606,139.42
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$5,212,278.84	\$00	\$2,606,139.42

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-185-00BB - Broadband Grants	01/15/2021	01/15/2021	\$2,606,139.42	Facilitating Distance Learning	
Total:						\$2,606,139.42

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 367619

54	Sub-Recipient Organization (Awardee)*	Vinton Municipal Communications Utility-T185VINTO
55	Award Number*	367619
56	Award Payment Method*	Reimbursable
57	Amount of Award *	\$110,000.00
58	Award Date *	09/29/2020
59	Period of Performance Start Date *	09/29/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	412 1st Ave
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Vinton
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52349-1747
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	To provide broadband services to the vendors area of service.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-185-00BB - Broadband Grants	\$00	\$110,000.00	\$00	\$0.00
Total		\$00	\$110,000.00	\$00	\$0.00

Previous Expenditures (All previous quarters)

72 A	72 B	72 C	72 D	72 E
Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Total:				\$00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 367228

54	Sub-Recipient Organization (Awardee)*	Winnebago Cooperative Telecom Association-2107496WI
55	Award Number*	367228
56	Award Payment Method*	Reimbursable
57	Amount of Award *	\$1,014,304.55
58	Award Date *	02/10/2021
59	Period of Performance Start Date *	02/10/2021
60	Period of Performance End Date *	07/01/2021
61	Primary Place of Performance Address Line 1 *	704 E Main St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Lake Mills
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50450-1420
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide broadband services to the vendors area of service.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-185-00BB - Broadband Grants	\$00	\$1,014,304.55	\$00	\$748,500.00
Total		\$00	\$1,014,304.55	\$00	\$748,500.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-185-00BB - Broadband Grants	02/10/2021 02/10/2021	\$748,500.00	Facilitating Distance Learning	
Total:					\$748,500.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFIF-0052-0025000

54	Sub-Recipient Organization (Awardee)*	B and D Services Inc.-0025000BAN	
55	Award Number*	309-PFIF-0052-0025000	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$61,124.31
58	Award Date *	09/30/2020	
59	Period of Performance Start Date *	09/30/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	212 1st St E	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Independence	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50644-2813	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	1	
70	Award Description *	Training will be provided to 76 participants to become a Direct Support Professional, a critical job need in Iowa. In addition, financial support will be provided to remove barriers to start and maintain employment including laptops and hot spots for participants to use during training.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$61,124.31	\$00	\$61,124.31
Total		\$00	\$61,124.31	\$00	\$61,124.31

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$61,124.31	Items Not Listed Above	Vocational Training
Total:					\$61,124.31

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
Total:						\$00

Sub Screen: Award: 309-PFIF-0052-3046015

54	Sub-Recipient Organization (Awardee)*	Marshall County Comms Commission-3046015MA
55	Award Number*	309-PFIF-0052-3046015
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$0.00
58	Award Date *	09/29/2020
59	Period of Performance Start Date *	09/29/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	909 S 2nd St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Marshalltown
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50158-3217
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	This project will offer a series of eight virtual one-week online courses with the ability to accept applicants from all geographic regions of the state. Funds will provide wrap-around support such as internet reimbursement, childcare costs, and other items needed to assist participants in completion of training. This will provide 200 Iowans with certification upon completion for the 40-hour basic course required by all 911 agencies in the state of Iowa.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$0.00	\$00	\$0.00

Previous Expenditures (All previous quarters)

72 A	72 B	72 C	72 D	72 E
Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Total:		\$00		

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFIF-0052-2130583

54	Sub-Recipient Organization (Awardee)*	City of State Center-2130583ST
55	Award Number*	309-PFIF-0052-2130583
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$99,900.00
58	Award Date *	09/30/2020
59	Period of Performance Start Date *	09/30/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	118 Main St W
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	State Center
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50247-7769
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	This project will provide training for 24 initial participants to achieve the Reserve Peace Officer certification through the Iowa Law Enforcement Academy. The goal is to recruit candidates who are considering a career in law enforcement as a career change due to the impacts of the pandemic as well as address critical shortages in law enforcement.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$99,900.00	\$00	\$99,900.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$99,900.00	\$00	\$99,900.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$99,900.00	Items Not Listed Above	Vocational Training
Total:					\$99,900.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00		
Total:			\$00			

Sub Screen: Award: 309-PFIF-0052-3183185

54	Sub-Recipient Organization (Awardee)*	Apprenticeship America-3183185AP	
55	Award Number*	309-PFIF-0052-3183185	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$89,611.37
58	Award Date *	09/30/2020	
59	Period of Performance Start Date *	09/30/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	2341 SW Plaza Pkwy	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Ankeny	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50023-7310	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	3	
70	Award Description *	This project will create an online platform that provides online pre-apprenticeship training and placement services for high-demand careers. A minimum of 21 Iowans will receive training and a stipend along with additional support services via community-based partners.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$89,611.37	\$00	\$89,611.37
Total		\$00	\$89,611.37	\$00	\$89,611.37

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$89,611.37	Items Not Listed Above	Vocational Training
Total:					\$89,611.37

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
Total:						\$00

Sub Screen: Award: 309-PFIF-0052-2120627

54	Sub-Recipient Organization (Awardee)*	Circle Computer Resources-2120627CI	
55	Award Number*	309-PFIF-0052-2120627	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *	\$74,762.44	
58	Award Date *	09/23/2020	
59	Period of Performance Start Date *	09/23/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	845 Capital Dr SW	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Cedar Rapids	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52404-9091	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	1	
70	Award Description *	<p>CCR has partnered with 4 organizations to serve Iowans whose employment has been lost due to the pandemic. The program will start with a 4-week help desk training course led by Delta V, followed by 8 weeks of network training and remote work training skills provided by Distributed Consulting and CCR. A monthly stipend will be provided to each participant to assist in transportation, childcare and other expenses during training. Upon certification, participants will be eligible for a full-time role at CCR.</p>	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$74,762.44	\$00	\$74,762.44
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$74,762.44	\$00	\$74,762.44

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$74,762.44	Items Not Listed Above	Vocational Training
Total:					\$74,762.44

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 309-PFIF-0052-3106449

54	Sub-Recipient Organization (Awardee)*	The CEU Authority-3106449CE
55	Award Number*	309-PFIF-0052-3106449
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$88,000.00
58	Award Date *	09/30/2020
59	Period of Performance Start Date *	09/30/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	5644 NE 17th St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Des Moines
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50313-1616
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	Through an Apprenticeship program, training in the high demand fields of HVAC/R, Mechanical and Plumbing will be made available to 20 Iowans whose employment has been affected by the pandemic. This program is provided 100% online and the training will be livestreamed for participants

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$88,000.00	\$00	\$88,000.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$88,000.00	\$00	\$88,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$88,000.00	Items Not Listed Above	Vocational Training
Total:					\$88,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFIF-0052-2109410

54	Sub-Recipient Organization (Awardee)*	Eastern Iowa Community College-2109410EA	
55	Award Number*	309-PFIF-0052-2109410	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$97,655.57
58	Award Date *	09/23/2020	
59	Period of Performance Start Date *	09/23/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	101 W 3rd St	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Davenport	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52801-1419	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	2	
70	Award Description *	Funding will be used to cover tuition costs for 88 Iowans in high-demand careers like truck driving, manufacturing and front-line supervision with the goal of placing all completers in jobs with local employers.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$97,655.57	\$00	\$97,655.57
Total		\$00	\$97,655.57	\$00	\$97,655.57

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$97,655.57	Items Not Listed Above	Vocational Training
Total:					\$97,655.57

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes					
74	Non-Compliance Explanation						
	75 A	75 B	75 C	75 D	75 E		
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete	
Line 1	0		\$00				
Total:							\$00

Sub Screen: Award: 309-PFIF-0052-2116818

54	Sub-Recipient Organization (Awardee)*	Four Mounds Foundation-2116818FO
55	Award Number*	309-PFIF-0052-2116818
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$97,493.00
58	Award Date *	09/30/2020
59	Period of Performance Start Date *	09/30/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	4900 Peru Rd
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Dubuque
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52001-8304
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	Building on a current and successful model, funds will support at-risk youth in obtaining training and paid hands-on experience in the high-demand construction industry. Additional support services will also be provided.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$97,493.00	\$00	\$97,493.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$97,493.00	\$00	\$97,493.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$97,493.00	Items Not Listed Above	Vocational Training
Total:					\$97,493.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFIF-0052-2111488

54	Sub-Recipient Organization (Awardee)*	Heartland AEA-2111488HE
55	Award Number*	309-PFIF-0052-2111488
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$55,000.00
58	Award Date *	09/23/2020
59	Period of Performance Start Date *	09/23/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	6500 Corporate Dr
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Johnston
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50131-1603
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	High-demand and high growth industry-sponsored learning modules are available to thousands of Iowa students. This funding will provide training for teachers, counselors and others on how to utilize and enroll students in these modules. This work leads toward the goal of having 10,000 students enrolled in investigative learning modules.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$55,000.00	\$00	\$55,000.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$55,000.00	\$00	\$55,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$55,000.00	Items Not Listed Above	Vocational Training
Total:					\$55,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFIF-0052-3015626

54	Sub-Recipient Organization (Awardee)*	Involta-3015626IN
55	Award Number*	309-PFIF-0052-3015626
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$64,350.00
58	Award Date *	09/29/2020
59	Period of Performance Start Date *	09/29/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	460 12th Ave SE
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Cedar Rapids
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52401-2452
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	Funding will pay for the training of 7 individuals whose careers have been disrupted by the pandemic to become Computer User Support Specialist and Network and Computer Systems Administrators. Upon completion of the program, the goal is to hire all 7 participants. Training will be virtual and participants can come from anywhere in the state as long as they are willing to relocate to the Cedar Rapids metro area once trained.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$64,350.00	\$00	\$64,350.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$64,350.00	\$00	\$64,350.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$64,350.00	Items Not Listed Above	Vocational Training
Total:					\$64,350.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 309-PFIF-0052-2104181

54	Sub-Recipient Organization (Awardee)*	IOWA CENTRAL COMM COLLEG-2104181CE
55	Award Number*	309-PFIF-0052-2104181
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$99,053.62
58	Award Date *	09/23/2020
59	Period of Performance Start Date *	09/23/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	1 Triton Cir
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Fort Dodge
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50501-5729
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	Funding for this grant will support design and implementation of an 8-week hybrid non-credit Computer Numerical Control (CNC) Operator certificate training program. Participants will complete lecture components online and meet face-to-face for lab skills and hands-on training.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$99,053.62	\$00	\$99,053.62
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$99,053.62	\$00	\$99,053.62

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$99,053.62	Items Not Listed Above	Vocational Training
Total:					\$99,053.62

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFIF-0052-2105326

54	Sub-Recipient Organization (Awardee)*	Iowa Chronic Care Consortium-2105326CH
55	Award Number*	309-PFIF-0052-2105326
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$94,512.00
58	Award Date *	09/30/2020
59	Period of Performance Start Date *	09/30/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	2700 Westown Pkwy
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	West Des Moines
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50266-1411
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	The Iowa Chronic Care Consortium will partner with the University of Iowa's Institute for Public Health Practice, Des Moines Area Community College and community-based organizations to create a virtual Community Health Navigator training program which will be available statewide. Training and stipends to address barriers related to training will be provided for up to 25 participants.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$94,512.00	\$00	\$94,512.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$94,512.00	\$00	\$94,512.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$94,512.00	Items Not Listed Above	Vocational Training
Total:					\$94,512.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
Total:						\$00

Sub Screen: Award: 309-PFIF-0052-2106718

54	Sub-Recipient Organization (Awardee)*	Iowa Restaurant Association-2106718RE
55	Award Number*	309-PFIF-0052-2106718
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$100,000.00
58	Award Date *	09/30/2020
59	Period of Performance Start Date *	09/30/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	1501 42nd St Ste 294
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	West Des Moines
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50266-1005
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	<p>The Iowa Hospitality Industry has been one of the most affected industries by the pandemic. The Iowa Restaurant Association will enroll 500 affected industry workers in ServSafe Certified Food Protection Manager Courses (online or in-person) and cover the cost of training, books and exams. Training will be provided in multiple locations with several options to meet individual needs. Because every foodservice establishment in Iowa must have at least one Certified Food Protection Manager and the cost of the training is prohibitive due to the pandemic, this will serve hundreds of affected restaurants and bars.</p>

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$100,000.00	\$00	\$100,000.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$100,000.00	\$00	\$100,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$100,000.00	Items Not Listed Above	Vocational Training
Total:					\$100,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
Total:						\$00

Sub Screen: Award: 309-PFIF-0052-2121775

54	Sub-Recipient Organization (Awardee)*	Iowa Women's Foundation-2121775WO
55	Award Number*	309-PFIF-0052-2121775
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$79,935.50
58	Award Date *	09/30/2020
59	Period of Performance Start Date *	09/30/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	2201 E Grantview Dr
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Coralville
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52241-3488
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	The project's goal is to recruit, train, retain and support quality child care and early education providers across Iowa. Training sessions will be hosted in each of the 5 regions for a total of 10 training sessions resulting in 100 new childcare providers trained and ready to provide childcare in a home or business setting.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$79,935.50	\$00	\$79,935.50
Total		\$00	\$79,935.50	\$00	\$79,935.50

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$79,935.50	Items Not Listed Above	Vocational Training
Total:					\$79,935.50

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFIF-0052-2109497

54	Sub-Recipient Organization (Awardee)*	DES MOINES AREA COMM COL-2109497DE
55	Award Number*	309-PFIF-0052-2109497
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$98,010.00
58	Award Date *	09/30/2020
59	Period of Performance Start Date *	09/30/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	2006 S Ankeny Blvd Bld 1
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Ankeny
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50023-8995
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	In partnership with employers and community organizations, DMACC will provide training and support services for 10 individuals to be trained in construction and 12 individuals to be trained in semi-truck driving prior to February 28, 2021. They will target Iowans whose jobs have been affected by or eliminated because of the pandemic. Completion of training and job placement are project priorities.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$98,010.00	\$00	\$98,010.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$98,010.00	\$00	\$98,010.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$98,010.00	Items Not Listed Above	Vocational Training
Total:					\$98,010.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFIF-0052-2109376

54	Sub-Recipient Organization (Awardee)*	Indian Hills Comm College-2109376IN	
55	Award Number*	309-PFIF-0052-2109376	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$100,000.00
58	Award Date *	09/30/2020	
59	Period of Performance Start Date *	09/30/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	525 Grandview Ave	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Ottumwa	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52501-1359	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	2	
70	Award Description *	<p>This program will serve 15 Iowans, who will be provided with free tuition in the Productions Specialist Technician program. The grant also awards stipends to participants to address barriers such as childcare and transportation during training. Upon completion and receipt to certification, Indian Hills will assist with finding employment in the local area. The goal is to enroll 10 participants. Upon program completion, the college will partner with Fisher Industries and Bobalee Inc. to host a job fair networking event.</p>	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$100,000.00	\$00	\$100,000.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$100,000.00	\$00	\$100,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021	06/30/2021	\$100,000.00	Items Not Listed Above	Vocational Training
Total:						\$100,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 309-PFIF-0052-2109614

54	Sub-Recipient Organization (Awardee)*	IOWA LAKES COMM COLLEGE-2109614LA
55	Award Number*	309-PFIF-0052-2109614
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$100,000.00
58	Award Date *	09/30/2020
59	Period of Performance Start Date *	09/30/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	19 S 7th St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Estherville
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51334-2234
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	<p>A group of 16 businesses and support agencies collaborated to create a menu of short-term, non-credit programs needed in the area that will be made available to Iowans affected by the pandemic. Programs include Intro to GIS, three levels of Excel from Beginning to Advanced, Electrical Maintenance I and II, Class A CDL licensure, Commercial Drone Licensure prep and more. The goal is to enroll 100 participants resulting in certification and job placement.</p>

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$100,000.00	\$00	\$100,000.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$100,000.00	\$00	\$100,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021	06/30/2021	\$100,000.00	Items Not Listed Above	Vocational Training
Total:						\$100,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 309-PFIF-0052-2109515

54	Sub-Recipient Organization (Awardee)*	Iowa Valley Comm College-2109515VA
55	Award Number*	309-PFIF-0052-2109515
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$82,205.00
58	Award Date *	09/30/2020
59	Period of Performance Start Date *	09/30/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	3702 S Center St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Marshalltown
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50158-4760
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	In partnership with multiple local organizations, this project will provide credentials in highdemand manufacturing occupations. Training will be provided in the areas of machining, welding and electro-mechanical systems technology. The program will enroll 20 participants to take part in a 7-week program. A hybrid learning model will be available.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$82,205.00	\$00	\$82,205.00
Total		\$00	\$82,205.00	\$00	\$82,205.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$82,205.00	Items Not Listed Above	Vocational Training
Total:					\$82,205.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 309-PFIF-0052-2118592

54	Sub-Recipient Organization (Awardee)*	Gregory Design and Manufacturing-2118592GR	
55	Award Number*	309-PFIF-0052-2118592	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$80,959.00
58	Award Date *	09/30/2020	
59	Period of Performance Start Date *	09/30/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	2512 Henry Ladyn Dr	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Fort Madison	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52627-2519	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	2	
70	Award Description *	Gregory Design and Manufacturing has a goal of training a total of 44 people with a 4-week weld training program geared toward well-rounded production welding. Gregory intends to partner with the Burlington Residential Correctional Facility to recruit participants and hopes to hire completers.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$80,959.00	\$00	\$80,959.00
Total		\$00	\$80,959.00	\$00	\$80,959.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$80,959.00	Items Not Listed Above	Vocational Training
Total:					\$80,959.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
Total:						\$00

Sub Screen: Award: 309-PFIF-0052-2125815

54	Sub-Recipient Organization (Awardee)*	Mercy College of Health Sciences-2125815ME		
55	Award Number*	309-PFIF-0052-2125815		
56	Award Payment Method*	Lump Sum Payment(s)		
57	Amount of Award *			\$82,500.00
58	Award Date *	09/29/2020		
59	Period of Performance Start Date *	09/30/2020		
60	Period of Performance End Date *	06/30/2021		
61	Primary Place of Performance Address Line 1 *	928 6th Ave		
62	Primary Place of Performance Address Line 2			
63	Primary Place of Performance Address Line 3			
64	Primary Place of Performance City Name *	Des Moines		
65	Primary Place of Performance State Code *	IA		
66	Primary Place of Performance Zip+4 *	50309-1225		
67	Primary Place of Performance Country Name *	United States		
68	Primary Place of Performance Country Code *	USA		
69	Primary Place of Performance Congressional District *	3		
70	Award Description *	<p>The program will support students who have been negatively affected by the loss of jobs and/or faced a reduction in hours due to the pandemic. The funding will focus on providing sufficient resources and support so that students in the final semester successfully graduate and pass the National Council Licensure Examination.</p>		

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$82,500.00	\$00	\$82,500.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$82,500.00	\$00	\$82,500.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 - 06/30/2021	\$82,500.00	Items Not Listed Above	Vocational Training
Total:					\$82,500.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 309-PFIF-0052-2113851

54	Sub-Recipient Organization (Awardee)*	Horizons A Family Service Alliance-2113851HO	
55	Award Number*	309-PFIF-0052-2113851	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$97,490.00
58	Award Date *	09/30/2020	
59	Period of Performance Start Date *	09/30/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	819 5th St SE	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Cedar Rapids	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52401-2128	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	1	
70	Award Description *	Neighborhood Transportation Service will implement on-demand transportation scheduling to increase access to education and training for individuals working to earn credentials linked to high-demand jobs. The funding will provide software and two new wheelchairs to support program services.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$97,490.00	\$00	\$97,490.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$97,490.00	\$00	\$97,490.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$97,490.00	Items Not Listed Above	Vocational Training
Total:					\$97,490.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
Total:						\$00

Sub Screen: Award: 309-PFIF-0052-2107423

54	Sub-Recipient Organization (Awardee)*	Allen Memorial Hospital - Waterloo-2107423AL	
55	Award Number*	309-PFIF-0052-2107423	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$71,790.84
58	Award Date *	09/30/2020	
59	Period of Performance Start Date *	09/30/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	1825 Logan Ave	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Waterloo	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50703-1916	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	1	
70	Award Description *	Allen Memorial Hospital intends to recruit and train 70 new Patient Safety Technicians and Nurse Residents. The program will provide additional training in crisis intervention to 100 existing team members whose work has been affected by the pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$71,790.84	\$00	\$71,790.84
Total		\$00	\$71,790.84	\$00	\$71,790.84

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	05/03/2021 05/03/2021	\$71,790.84	Items Not Listed Above	Vocational Training
Total:					\$71,790.84

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
Total:						\$00

Sub Screen: Award: 309-PFIF-0052-3088192

54	Sub-Recipient Organization (Awardee)*	BDC Group Inc-3088192BD
55	Award Number*	309-PFIF-0052-3088192
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$86,597.00
58	Award Date *	09/30/2020
59	Period of Performance Start Date *	09/30/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	1936 51st St NE
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Cedar Rapids
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52402-2459
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	In response to high demand for fiber optic installers in construction, BDC has a significant need for skilled equipment operators. This project will provide training for 14 current employees to upskill. Training will include certification in drill operating, jetting operating and other related skills.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$86,597.00	\$00	\$86,597.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$86,597.00	\$00	\$86,597.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$86,597.00	Items Not Listed Above	Vocational Training
Total:					\$86,597.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFIF-0052-2107002

54	Sub-Recipient Organization (Awardee)*	Central College-2107002CE
55	Award Number*	309-PFIF-0052-2107002
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$80,850.00
58	Award Date *	09/30/2020
59	Period of Performance Start Date *	09/30/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	812 University St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Pella
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50219-1902
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	Funding will support the Pella Talent Pipeline Apprenticeship School and to accelerate individual completion of apprenticeships and certifications in the following programs: welding, information technology, culinary arts, engineering assistant, early childhood education and certified nursing assistant.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$80,850.00	\$00	\$80,850.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$80,850.00	\$00	\$80,850.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$80,850.00	Items Not Listed Above	Vocational Training
Total:					\$80,850.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFIF-0052-3183379

54	Sub-Recipient Organization (Awardee)*	Generativity LLC-3183379GE
55	Award Number*	309-PFIF-0052-3183379
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$96,800.00
58	Award Date *	09/30/2020
59	Period of Performance Start Date *	09/30/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	2067 Highway 4
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Panora
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50216-8601
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	Assisted living services have been hard hit by the pandemic. Funding will provide training for current employees as well as new hires in ServSafe, CPR, CNA, Medication Manager, and Certified Medication Aide positions.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$96,800.00	\$00	\$96,800.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$96,800.00	\$00	\$96,800.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$96,800.00	Items Not Listed Above	Vocational Training
Total:					\$96,800.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 309-PFIF-0052-3037802

54	Sub-Recipient Organization (Awardee)*	Greater Dubuque Development Corp-3037802GR
55	Award Number*	309-PFIF-0052-3037802
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$100,000.00
58	Award Date *	09/30/2020
59	Period of Performance Start Date *	09/30/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	900 Jackson St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Dubuque
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52001-5006
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	This project will serve 70 students by providing in-demand and essential short-term training focused on Industrial Maintenance, Production, Industrial Sewing, CNC assembly and more. Stipends will be available during training to those students in need.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$100,000.00	\$00	\$100,000.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$100,000.00	\$00	\$100,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$100,000.00	Items Not Listed Above	Vocational Training
Total:					\$100,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFIF-0052-3013226

54	Sub-Recipient Organization (Awardee)*	Pro Tow LLC-3013226PR	
55	Award Number*	309-PFIF-0052-3013226	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$89,654.00
58	Award Date *	09/30/2020	
59	Period of Performance Start Date *	09/30/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	1501 76th Ave SW	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Cedar Rapids	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52404-7057	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	1	
70	Award Description *	This program will train 12 to 15 potential new drivers who will become certified and licensed, including a class A CDL, in many areas related to the towing field. This project will recruit lowans experiencing barriers and those whose jobs were affected by the pandemic and provide training and certification in these areas. A stipend will be provided to participants during training to reduce barriers as they complete the program. Upon successful completion, a job offer may be extended to qualified participants.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$89,654.00	\$00	\$89,654.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$89,654.00	\$00	\$89,654.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021	06/30/2021	\$89,654.00	Items Not Listed Above	Vocational Training
Total:						\$89,654.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 309-PFIF-0052-3183388

54	Sub-Recipient Organization (Awardee)*	One City United-3183388ON
55	Award Number*	309-PFIF-0052-3183388
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$63,997.00
58	Award Date *	09/30/2020
59	Period of Performance Start Date *	09/30/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	907 Independence Ave
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Waterloo
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50703-4203
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	Job and life skills training is provided to unemployed and underemployed Iowans facing 2 or more barriers to employment. This program will include wrap around supports for participants while they obtain training leading to job placement in warehouses or manufacturing.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$63,997.00	\$00	\$63,997.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$63,997.00	\$00	\$63,997.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$63,997.00	Items Not Listed Above	Vocational Training
Total:					\$63,997.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFIF-0052-2109432

54	Sub-Recipient Organization (Awardee)*	Kirkwood Community College-2109432KI
55	Award Number*	309-PFIF-0052-2109432
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$100,000.00
58	Award Date *	09/30/2020
59	Period of Performance Start Date *	09/30/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	6301 Kirkwood Blvd SW
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Cedar Rapids
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52404-5260
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	This project will help students complete the second year of their associate's degrees in highdemand occupations. It will focus on students who are now facing barriers to completion due to the pandemic. Students will be provided wrap around support services to help with retention and completion, including assistance paying for books, food, childcare, transportation, internet access and other barriers.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$100,000.00	\$00	\$100,000.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$100,000.00	\$00	\$100,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$100,000.00	Items Not Listed Above	Vocational Training
Total:					\$100,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 309-PFIF-0052-3078872

54	Sub-Recipient Organization (Awardee)*	The New Bohemian Collaborative Inc-3078872NE
55	Award Number*	309-PFIF-0052-3078872
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$100,000.00
58	Award Date *	09/30/2020
59	Period of Performance Start Date *	09/30/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	415 12th Ave SE
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Cedar Rapids
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52401-2449
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	DeltaV had created two shorter IT programs to retrain adults whose careers have been impacted by the pandemic to become Computer User Support Specialists and Network and Computer Systems Administrators. The programs are 4 and 8 weeks respectively. Funding will provide 10 full-time scholarships for tuition, laptops, textbooks and Ops Kits.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$100,000.00	\$00	\$100,000.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$100,000.00	\$00	\$100,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$100,000.00	Items Not Listed Above	Vocational Training
Total:					\$100,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
Total:						\$00

Sub Screen: Award: 309-PFIF-0052-3056889

54	Sub-Recipient Organization (Awardee)*	Project Iowa-3056889PR
55	Award Number*	309-PFIF-0052-3056889
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$98,707.77
58	Award Date *	09/30/2020
59	Period of Performance Start Date *	09/30/2020
60	Period of Performance End Date *	09/30/2021
61	Primary Place of Performance Address Line 1 *	1420 Mulberry St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Des Moines
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50309-3618
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	In partnership with DMACC Continuing Education, DoExtra and NewboCo, Project Iowa will provide comprehensive Path to Purpose education and wrap around services while education partners will provide skill development for participants on one of three high demand fields (Transportation and Logistics, Salesforce Management and Design and IT Help Desk). This programming is available virtually and therefore available to Iowans impacted by the pandemic all across the state.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$-92.23	\$98,707.77	\$-92.23	\$98,707.77
Line 2	0	\$00	\$0.00	\$0.00	\$0.00
Total		\$-92.23	\$98,707.77	\$-92.23	\$98,707.77

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$98,800.00	Items Not Listed Above	Vocational Training
Total:					\$98,800.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description>Delete
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	07/01/2021	09/30/2021	\$-92.23	Items Not Listed Above	Vocational Training
Total:				\$-92.23		

Sub Screen: Award: 309-PFIF-0052-2110071

54	Sub-Recipient Organization (Awardee)*	United Way of Story County-2110071UN	
55	Award Number*	309-PFIF-0052-2110071	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$87,868.00
58	Award Date *	09/29/2020	
59	Period of Performance Start Date *	09/30/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	315 Clark Ave	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Ames	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50010-3314	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	4	
70	Award Description *	This collaborative project will offer three educational programs in Story County including MIG Welding, Manufacturing Production Technician Certification and Certified Nursing Assistant training. Programs will be geared toward those impacted by the pandemic and who are underrepresented. The project will provide training at no cost to the participants and will support employment placement upon completion	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$87,868.00	\$00	\$87,868.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$87,868.00	\$00	\$87,868.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021	06/30/2021	\$87,868.00	Items Not Listed Above	Vocational Training
Total:						\$87,868.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 309-PFIF-0052-3007933

54	Sub-Recipient Organization (Awardee)*	Willis Dady Emergency Shelter-3007933W1	
55	Award Number*	309-PFIF-0052-3007933	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$87,234.99
58	Award Date *	09/30/2020	
59	Period of Performance Start Date *	09/30/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	1247 4th Ave SE	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Cedar Rapids	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52403-4020	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	1	
70	Award Description *	Willis Dady Emergency Shelter works with clients who have been unable to maintain housing due to unstable employment most recently due to the pandemic. The funds will be used to support 40 clients with multiple barriers by providing funding for online or in-person training programs in high-demand jobs.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$87,234.99	\$00	\$87,234.99
Total		\$00	\$87,234.99	\$00	\$87,234.99

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$87,234.99	Items Not Listed Above	Vocational Training
Total:					\$87,234.99

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
Total:						\$00

Sub Screen: Award: 309-PFIF-0052-2124745

54	Sub-Recipient Organization (Awardee)*	Iowa Job for America's Graduates-2124745JO
55	Award Number*	309-PFIF-0052-2124745
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$100,000.00
58	Award Date *	09/30/2020
59	Period of Performance Start Date *	09/30/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	1111 9th St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Des Moines
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50314-2527
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	In the context of the COVID-19 pandemic, students facing multiple barriers will need additional support to compete in the job market. Funding will provide skill-building and career exploration programs for more than 1,500 participants, all of whom are facing reduced employment opportunities. This project will also support credential preparation and achievement in highdemand careers for at least 100 underserved young people.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$100,000.00	\$00	\$100,000.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$100,000.00	\$00	\$100,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$100,000.00	Items Not Listed Above	Vocational Training
Total:					\$100,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 309-PFIF-0052-2111132

54	Sub-Recipient Organization (Awardee)*	Southeast Iowa Regional Planning Commission-2111132SO	
55	Award Number*	309-PFIF-0052-2111132	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$99,997.50
58	Award Date *	09/30/2020	
59	Period of Performance Start Date *	09/30/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	211 N Gear Ave	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	West Burlington	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52655-1011	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	2	
70	Award Description *	<p>The pandemic has significantly impacted incarcerated men due to the reduction and elimination of training programs within facilities. Without training, re-entry prospects are limited. Homes for Iowa Inc. will facilitate this project to train 25 men in OSHA 10 and construction. The program will provide equipment, worksite protective clothing and tools. Homes for Iowa works with employer partners to make job contacts and place trained individuals in high-demand construction jobs upon release.</p>	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$99,997.50	\$00	\$99,997.50
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$99,997.50	\$00	\$99,997.50

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021	06/30/2021	\$99,997.50	Items Not Listed Above	Vocational Training
Total:						\$99,997.50

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 309-PFIF-0052-3024592

54	Sub-Recipient Organization (Awardee)*	Iowa Western Community College-3024592WE
55	Award Number*	309-PFIF-0052-3024592
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$99,000.00
58	Award Date *	09/30/2020
59	Period of Performance Start Date *	09/30/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	2700 College Rd
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Council Bluffs
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51503-1057
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	Due to the coronavirus, the delivery of CEAM Welding and Hydraulic Training is being reconfigured into a hybrid education model. Funding will support the reconfiguration and proposes to enroll 8-27 participants affected by the pandemic to successfully complete the program

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$99,000.00	\$00	\$99,000.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$99,000.00	\$00	\$99,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$99,000.00	Items Not Listed Above	Vocational Training
Total:					\$99,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFIF-0052-3017072

54	Sub-Recipient Organization (Awardee)*	HS Medical Billing Services-3017072HS	
55	Award Number*	309-PFIF-0052-3017072	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$64,658.00
58	Award Date *	09/30/2020	
59	Period of Performance Start Date *	09/30/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	500 E Court Ave	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Des Moines	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50309-2057	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *		
70	Award Description *	Funding will provide training opportunities in the high-demand medical billing and coding occupations. Participants will attend workplace training and on-line courses to complete one of five certification programs through the American Academy of Professional Coders related to medical coding and billing.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$64,658.00	\$00	\$64,658.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$64,658.00	\$00	\$64,658.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$64,658.00	Items Not Listed Above	Vocational Training
Total:					\$64,658.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
Total:						\$00

Sub Screen: Award: 309-PFIF-0052-2109477

54	Sub-Recipient Organization (Awardee)*	HAWKEYE COMMUNITY COLLEGE-2109477HA	
55	Award Number*	309-PFIF-0052-2109477	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$100,000.00
58	Award Date *	09/30/2020	
59	Period of Performance Start Date *	09/30/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	1501 E Orange Rd	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Waterloo	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50701-9014	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	1	
70	Award Description *	John Deere and Hawkeye Community College have partnered to create IGNITE: Mastering Manufacturing competency-based program for the manufacturing industry. The program is designed with multiple stackable, industry-recognized credentials that can be offered as noncredit training offered online, as a hybrid learning model, or in a classroom setting. The project intends to enroll 25 participants including those whose employment was affected by the pandemic. Waterloo Community School District is also a partner	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$100,000.00	\$00	\$100,000.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$100,000.00	\$00	\$100,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021	06/30/2021	\$100,000.00	Items Not Listed Above	Vocational Training
Total:						\$100,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 309-PFIF-0052-2129317

54	Sub-Recipient Organization (Awardee)*	UNIVERSITY OF IOWA-2129317UN
55	Award Number*	309-PFIF-0052-2129317
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$0.00
58	Award Date *	09/30/2020
59	Period of Performance Start Date *	09/30/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	118 S Clinton St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Iowa City
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52240-4045
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	This project will provide education, skills training, non-credit certifications and support for at least 100 Iowans whose employment has been affected by the pandemic. Funding will also provide stipends and certification fees for course participants to attend an intensive, two-week accelerated course in at least 3 communities.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$0.00	\$00	\$0.00

Previous Expenditures (All previous quarters)

72 A	72 B	72 C	72 D	72 E
Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Total:				\$00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
Total:						\$00

Sub Screen: Award: 309-PFIF-0052-3079062

54	Sub-Recipient Organization (Awardee)*	ETHNIC MINORITIES OF BURMA ADVOCACY AND-3079062ET	
55	Award Number*	309-PFIF-0052-3079062	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$50,985.00
58	Award Date *	09/30/2020	
59	Period of Performance Start Date *	09/30/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	2309 Euclid Ave	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Des Moines	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50310-5703	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	3	
70	Award Description *	Training will be provided to 54 RISE Americorp members, preparing them to support refugees across the state with mentoring, job coaching and access to obtaining credentials. These 54 individuals will then assist at least 200 refugee clients to enroll in education and training with the goal of gaining employment in high-demand fields.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$50,985.00	\$00	\$50,985.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$50,985.00	\$00	\$50,985.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021	06/30/2021	\$50,985.00	Items Not Listed Above
Total:					\$50,985.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
Total:						\$00

Sub Screen: Award: 309-PFIF-0052-2131924

54	Sub-Recipient Organization (Awardee)*	WOODBINE COMM SCH DIST-2131924WO
55	Award Number*	309-PFIF-0052-2131924
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$91,398.00
58	Award Date *	09/30/2020
59	Period of Performance Start Date *	09/30/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	501 Weare St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Woodbine
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51579-1225
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	Funding will restart a much-needed Welding program that was ended due to the pandemic. The Woodbine Community School District is partnering with Tommy Gate International for this program and will offer between 1-3 academic and concurrent enrollment credits to certify no less than 5 welders to fill needed positions at Tommy Gate.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$91,398.00	\$00	\$91,398.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$91,398.00	\$00	\$91,398.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$91,398.00	Items Not Listed Above	Vocational Training
Total:					\$91,398.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 309-PFIF-0052-2116253

54	Sub-Recipient Organization (Awardee)*	JB HOLLAND CONST INC-2116253JB	
55	Award Number*	309-PFIF-0052-2116253	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$95,441.00
58	Award Date *	09/30/2020	
59	Period of Performance Start Date *	09/30/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	2092 State Highway 9	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Decorah	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52101-7807	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	1	
70	Award Description *	JB Holland will hire 10 new employees at beginning level training and upskill 25 current employees with the purchase of an additional training simulator. The simulator will be portable and accessible for on-demand training, which helps employees receive additional training and certification. This supports new training opportunities for those affected by the pandemic and helps those hired gain additional experience related to the job.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$95,441.00	\$00	\$95,441.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$95,441.00	\$00	\$95,441.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	04/01/2021 06/30/2021	\$95,441.00	Items Not Listed Above	Vocational Training
Total:					\$95,441.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
Total:						\$00

Sub Screen: Award: ACFS-16-189

54	Sub-Recipient Organization (Awardee)*	NORTHEAST IA FOOD BANK-2114643NO
55	Award Number*	ACFS-16-189
56	Award Payment Method*	Reimbursable
57	Amount of Award *	\$258,000.00
58	Award Date *	05/18/2020
59	Period of Performance Start Date *	05/19/2020
60	Period of Performance End Date *	12/31/2020
61	Primary Place of Performance Address Line 1 *	1605 Lafayette St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Waterloo
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50703-4907
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	Reimbursement for costs associated with the acquisition of food and supplies in response to the coronavirus pandemic emergency. Food products unable to be secured through TEFAP, PPE, items needed for packaging and/or delivery of food products. No employee salary or benefit costs

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-FII2020 - Feeding Iowans Initiative	\$00	\$258,000.00	\$00	\$258,000.00
Total		\$00	\$258,000.00	\$00	\$258,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-FII2020 - Feeding Iowans Initiative	08/27/2020 08/27/2020	\$52,009.80	Food Programs	
Line 2	IA-FII2020 - Feeding Iowans Initiative	12/17/2020 12/17/2020	\$205,990.20	Food Programs	
Total:					\$258,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: ACFS-16-193

54	Sub-Recipient Organization (Awardee)*	RIVER BEND FOOD RESERVOIR-2100184RI
55	Award Number*	ACFS-16-193
56	Award Payment Method*	Reimbursable
57	Amount of Award *	\$251,400.00
58	Award Date *	05/18/2020
59	Period of Performance Start Date *	05/19/2020
60	Period of Performance End Date *	12/31/2020
61	Primary Place of Performance Address Line 1 *	4010 Kimmel Dr
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Davenport
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52802-2404
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	Reimbursement for costs associated with the acquisition of food and supplies in response to the coronavirus pandemic emergency. Food products unable to be secured through TEFAP, PPE, items needed for packaging and/or delivery of food products. No employee salary or benefit costs

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-FII2020 - Feeding Iowans Initiative	\$00	\$251,400.00	\$00	\$251,400.00
Total		\$00	\$251,400.00	\$00	\$251,400.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-FII2020 - Feeding Iowans Initiative	08/27/2020 08/27/2020	\$78,895.78	Food Programs	
Line 2	IA-FII2020 - Feeding Iowans Initiative	12/18/2020 12/18/2020	\$172,504.22	Food Programs	
Total:					\$251,400.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: ACFS-16-190

54	Sub-Recipient Organization (Awardee)*	FOOD BANK OF IOWA-2114861FO	
55	Award Number*	ACFS-16-190	
56	Award Payment Method*	Reimbursable	
57	Amount of Award *		\$936,400.00
58	Award Date *	05/18/2020	
59	Period of Performance Start Date *	05/19/2020	
60	Period of Performance End Date *	12/31/2020	
61	Primary Place of Performance Address Line 1 *	2220 E 17th St	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Des Moines	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50316-2114	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	3	
70	Award Description *	Reimbursement for costs associated with the acquisition of food and supplies in response to the coronavirus pandemic emergency. Food products unable to be secured through TEFAP, PPE, items needed for packaging and/or delivery of food products. No employee salary or benefit costs	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-FII2020 - Feeding Iowans Initiative	\$00	\$936,400.00	\$00	\$936,400.00
Total		\$00	\$936,400.00	\$00	\$936,400.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-FII2020 - Feeding Iowans Initiative	08/27/2020	08/27/2020	\$200,000.00	Food Programs	
Line 2	IA-FII2020 - Feeding Iowans Initiative	12/17/2020	12/17/2020	\$736,400.00	Food Programs	
Total:				\$936,400.00		

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 0000753GL

54	Sub-Recipient Organization (Awardee)*	GLOBAL REACH INTERNET PRODUCTIONS, LLC-0000753GL	
55	Award Number*	0000753GL	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$83,750.74
58	Award Date *	10/15/2020	
59	Period of Performance Start Date *	10/16/2020	
60	Period of Performance End Date *	12/31/2021	
61	Primary Place of Performance Address Line 1 *	2321 N Loop Dr	
62	Primary Place of Performance Address Line 2	Ste 210	
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Ames	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50010-8281	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	4	
70	Award Description *	Administrative Expenses	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-270-0036 - Iowa Beginning Farmer Debt Relief	\$00	\$83,750.74	\$00	\$83,750.74
Total		\$00	\$83,750.74	\$00	\$83,750.74

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-270-0036 - Iowa Beginning Farmer Debt Relief	10/16/2020	10/23/2020	\$83,750.74	Administrative Expenses	
Total:						\$83,750.74

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 0002918CO

54	Sub-Recipient Organization (Awardee)*	IOWA COMMUNITY ACTION ASSOCIATION-0002918CO
55	Award Number*	0002918CO
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$316,677.18
58	Award Date *	10/01/2020
59	Period of Performance Start Date *	10/01/2020
60	Period of Performance End Date *	10/31/2020
61	Primary Place of Performance Address Line 1 *	1620 Pleasant St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Des Moines
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50314-1675
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	Housing Support

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-270-0035 - Eviction and Foreclosure Prevention Program	\$00	\$316,677.18	\$00	\$316,677.18
Total		\$00	\$316,677.18	\$00	\$316,677.18

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-270-0035 - Eviction and Foreclosure Prevention Program	10/02/2020 10/21/2020	\$316,677.18	Housing Support	
Total:					\$316,677.18

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 269-0048-010C-0026900AL

54	Sub-Recipient Organization (Awardee)*	ALAN KRULL-0026900AL
55	Award Number*	269-0048-010C-0026900AL
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$80,000.00
58	Award Date *	11/23/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	317 CHARLES STREET
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	ORANGE CITY
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51041
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0048 - Movie Theater Relief Program	\$00	\$80,000.00	\$00	\$80,000.00
Total		\$00	\$80,000.00	\$00	\$80,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0048 - Movie Theater Relief Program	11/24/2020 11/24/2020	\$80,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$80,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0048-010C-0026900AM

54	Sub-Recipient Organization (Awardee)*	AMERICAN MULTI-CINEMA INC-0026900AM
55	Award Number*	269-0048-010C-0026900AM
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$920,000.00
58	Award Date *	11/23/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	126 N WALNUT ST
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	LEAWOOD
65	Primary Place of Performance State Code *	KS
66	Primary Place of Performance Zip+4 *	66211
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0048 - Movie Theater Relief Program	\$00	\$920,000.00	\$00	\$920,000.00
Total		\$00	\$920,000.00	\$00	\$920,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0048 - Movie Theater Relief Program	11/24/2020 11/24/2020	\$920,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$920,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0048-010C-0026900BB

54	Sub-Recipient Organization (Awardee)*	B&B THEATRES OPERATING CO INC-0026900BB
55	Award Number*	269-0048-010C-0026900BB
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$120,000.00
58	Award Date *	11/23/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	203 1ST AVE EAST
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	LIBERTY
65	Primary Place of Performance State Code *	MO
66	Primary Place of Performance Zip+4 *	64069
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0048 - Movie Theater Relief Program	\$00	\$120,000.00	\$00	\$120,000.00
Total		\$00	\$120,000.00	\$00	\$120,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0048 - Movie Theater Relief Program	11/24/2020 11/24/2020	\$120,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$120,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0048-010C-0026900CI

54	Sub-Recipient Organization (Awardee)*	CINEMARK USA INC-0026900CI
55	Award Number*	269-0048-010C-0026900CI
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$1,060,000.00
58	Award Date *	11/23/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	1307 BROADWAY
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	PLANO
65	Primary Place of Performance State Code *	TX
66	Primary Place of Performance Zip+4 *	75093
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0048 - Movie Theater Relief Program	\$00	\$1,060,000.00	\$00	\$1,060,000.00
Total		\$00	\$1,060,000.00	\$00	\$1,060,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0048 - Movie Theater Relief Program	11/24/2020 12/01/2020	\$1,060,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$1,060,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0048-010C-0026900CO

54	Sub-Recipient Organization (Awardee)*	COLLINS ROAD THEATRES INC-0026900CO
55	Award Number*	269-0048-010C-0026900CO
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$50,000.00
58	Award Date *	11/23/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	1100 14th St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Marion
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52302-2560
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0048 - Movie Theater Relief Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0048 - Movie Theater Relief Program	11/24/2020 11/24/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0048-010C-0026900FI

54	Sub-Recipient Organization (Awardee)*	FILMSCENE-0026900FI
55	Award Number*	269-0048-010C-0026900FI
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$50,000.00
58	Award Date *	11/23/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	417 SW 8TH STREET
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	IOWA CITY
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52240
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0048 - Movie Theater Relief Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0048 - Movie Theater Relief Program	11/24/2020 11/24/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0048-010C-0026900FL

54	Sub-Recipient Organization (Awardee)*	FLIX BREWHOUSE LLC-0026900FL
55	Award Number*	269-0048-010C-0026900FL
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$80,000.00
58	Award Date *	11/23/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	2018 GRANT STREET
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	ROUND ROCK
65	Primary Place of Performance State Code *	TX
66	Primary Place of Performance Zip+4 *	78681
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0048 - Movie Theater Relief Program	\$00	\$80,000.00	\$00	\$80,000.00
Total		\$00	\$80,000.00	\$00	\$80,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0048 - Movie Theater Relief Program	11/24/2020 11/24/2020	\$80,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$80,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0048-010C-0026900KI

54	Sub-Recipient Organization (Awardee)*	KING THEATER-0026900KI	
55	Award Number*	269-0048-010C-0026900KI	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$50,000.00
58	Award Date *	11/23/2020	
59	Period of Performance Start Date *	11/24/2020	
60	Period of Performance End Date *	11/24/2020	
61	Primary Place of Performance Address Line 1 *	3300 NORTHBROOK DRIVE SUITE B	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	DENISON	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	51442	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *		
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0048 - Movie Theater Relief Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0048 - Movie Theater Relief Program	11/24/2020 11/24/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
Total:						\$00

Sub Screen: Award: 269-0048-010C-0026900MA

54	Sub-Recipient Organization (Awardee)*	MARCUS THEATRES CORPORATION-0026900MA
55	Award Number*	269-0048-010C-0026900MA
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$660,000.00
58	Award Date *	11/23/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	2060 SOVIA DR
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	MILWAUKEE
65	Primary Place of Performance State Code *	WI
66	Primary Place of Performance Zip+4 *	53202
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0048 - Movie Theater Relief Program	\$00	\$660,000.00	\$00	\$660,000.00
Total		\$00	\$660,000.00	\$00	\$660,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0048 - Movie Theater Relief Program	11/24/2020 11/24/2020	\$660,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$660,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0048-010C-0026900OD

54	Sub-Recipient Organization (Awardee)*	ODYSSEY ENTERTAINMENT INC-0026900OD
55	Award Number*	269-0048-010C-0026900OD
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$70,000.00
58	Award Date *	11/23/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	22387 150TH AVE
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	CRYSTAL
65	Primary Place of Performance State Code *	MN
66	Primary Place of Performance Zip+4 *	55429
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0048 - Movie Theater Relief Program	\$00	\$70,000.00	\$00	\$70,000.00
Total		\$00	\$70,000.00	\$00	\$70,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0048 - Movie Theater Relief Program	11/24/2020 11/24/2020	\$70,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$70,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0048-010C-0026900PC

54	Sub-Recipient Organization (Awardee)*	P-CORN ACQUISITIONS MISSOURI CORPORATION-0026900PC
55	Award Number*	269-0048-010C-0026900PC
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$160,000.00
58	Award Date *	11/23/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	6312 NW 95TH ST
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	MILWAUKEE
65	Primary Place of Performance State Code *	WI
66	Primary Place of Performance Zip+4 *	53202
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0048 - Movie Theater Relief Program	\$00	\$160,000.00	\$00	\$160,000.00
Total		\$00	\$160,000.00	\$00	\$160,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0048 - Movie Theater Relief Program	11/24/2020 11/24/2020	\$160,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$160,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0048-010C-0026900PH

54	Sub-Recipient Organization (Awardee)*	PHOENIX THEATRES DUBUQUE LLC-0026900PH
55	Award Number*	269-0048-010C-0026900PH
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$60,000.00
58	Award Date *	11/23/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	1034 AVENUE E
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	FARMINGTON
65	Primary Place of Performance State Code *	MI
66	Primary Place of Performance Zip+4 *	48336
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0048 - Movie Theater Relief Program	\$00	\$60,000.00	\$00	\$60,000.00
Total		\$00	\$60,000.00	\$00	\$60,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0048 - Movie Theater Relief Program	11/24/2020 11/24/2020	\$60,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$60,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0048-010C-0026900RL

54	Sub-Recipient Organization (Awardee)*	RL FRIDLEY THEATRES INC-0026900RL
55	Award Number*	269-0048-010C-0026900RL
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$940,000.00
58	Award Date *	11/23/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	119 E Washington Ave
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Des Moines
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50316-2242
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0048 - Movie Theater Relief Program	\$00	\$940,000.00	\$00	\$940,000.00
Total		\$00	\$940,000.00	\$00	\$940,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0048 - Movie Theater Relief Program	11/24/2020 11/24/2020	\$940,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$940,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0048-010C-0026900SI

54	Sub-Recipient Organization (Awardee)*	SILVER SCREEN MAGIC LLC-0026900SI
55	Award Number*	269-0048-010C-0026900SI
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$50,000.00
58	Award Date *	11/23/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	728 CENTRAL AVE
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	ELKADER
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52043
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0048 - Movie Theater Relief Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0048 - Movie Theater Relief Program	11/24/2020 11/24/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0049-010F-2087900SE

54	Sub-Recipient Organization (Awardee)*	SELECT SPECIALTY HOSPITAL-QUAD CITIES-2087900SE
55	Award Number*	269-0049-010F-2087900SE
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$118,018.17
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	1111 W Kimberly Rd
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Davenport
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52806-5711
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$118,018.17	\$00	\$118,018.17
Total		\$00	\$118,018.17	\$00	\$118,018.17

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$118,018.17	Public Health Expenses	
Total:					\$118,018.17

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0043-009Q-2087927HU

54	Sub-Recipient Organization (Awardee)*	HUMILITY HOMES AND SERVICES INC-2087927HU
55	Award Number*	269-0043-009Q-2087927HU
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$150,000.00
58	Award Date *	10/06/2020
59	Period of Performance Start Date *	11/02/2020
60	Period of Performance End Date *	11/02/2020
61	Primary Place of Performance Address Line 1 *	3805 Mississippi Ave
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Davenport
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52807-1816
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and supports, and/or to reopen the nonprofit following the COVID-19 pandemic. This grant was targeted to shelters.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0379 - Small Business Relief Grants	\$00	\$150,000.00	\$00	\$150,000.00
Total		\$00	\$150,000.00	\$00	\$150,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0379 - Small Business Relief Grants	11/02/2020 11/02/2020	\$150,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$150,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A		75 B	75 C	75 D	75 E
	Project*		Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description>Delete
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 269-0045-009X-2088013GO

54	Sub-Recipient Organization (Awardee)*	GOLDEN GRAIN ENERGY LLC-2088013GO
55	Award Number*	269-0045-009X-2088013GO
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$749,515.00
58	Award Date *	10/04/2020
59	Period of Performance Start Date *	10/21/2020
60	Period of Performance End Date *	10/21/2020
61	Primary Place of Performance Address Line 1 *	1822 43rd St SW
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Mason City
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50401-7071
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0045 - State Biofuel Grant Program	\$00	\$749,515.00	\$00	\$749,515.00
Total		\$00	\$749,515.00	\$00	\$749,515.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0045 - State Biofuel Grant Program	10/21/2020 10/21/2020	\$749,515.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$749,515.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 269-0045-009X-2091741LI

54	Sub-Recipient Organization (Awardee)*	LINCOLNWAY ENERGY LLC-2091741LI
55	Award Number*	269-0045-009X-2091741LI
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$371,296.00
58	Award Date *	10/04/2020
59	Period of Performance Start Date *	10/15/2020
60	Period of Performance End Date *	11/16/2020
61	Primary Place of Performance Address Line 1 *	975 W Lincoln Hwy Ste B
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Nevada
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50201-7961
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0045 - State Biofuel Grant Program	\$00	\$371,296.00	\$00	\$371,296.00
Total		\$00	\$371,296.00	\$00	\$371,296.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0045 - State Biofuel Grant Program	10/15/2020 11/16/2020	\$371,296.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$371,296.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0045-009X-2092800SO

54	Sub-Recipient Organization (Awardee)*	SOUTHWEST IOWA RENEWABLE-2092800SO	
55	Award Number*	269-0045-009X-2092800SO	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$679,415.00
58	Award Date *	10/04/2020	
59	Period of Performance Start Date *	10/15/2020	
60	Period of Performance End Date *	10/15/2020	
61	Primary Place of Performance Address Line 1 *	10868 189th St	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Council Bluffs	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	51503-6925	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *		
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0045 - State Biofuel Grant Program	\$00	\$679,415.00	\$00	\$679,415.00
Total		\$00	\$679,415.00	\$00	\$679,415.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0045 - State Biofuel Grant Program	10/15/2020	10/15/2020	\$679,415.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:						\$679,415.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 269-0045-009X-2093393AB

54	Sub-Recipient Organization (Awardee)*	ABSOLUTE ENERGY LLC-2093393AB
55	Award Number*	269-0045-009X-2093393AB
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$750,000.00
58	Award Date *	10/04/2020
59	Period of Performance Start Date *	10/19/2020
60	Period of Performance End Date *	11/16/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 265
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Saint Ansgar
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50472-0265
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0045 - State Biofuel Grant Program	\$00	\$750,000.00	\$00	\$750,000.00
Total		\$00	\$750,000.00	\$00	\$750,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0045 - State Biofuel Grant Program	10/19/2020 11/16/2020	\$750,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$750,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0045-009X-2093406WE

54	Sub-Recipient Organization (Awardee)*	WESTERN DUBUQUE BIODIESE-2093406WE
55	Award Number*	269-0045-009X-2093406WE
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$113,196.00
58	Award Date *	10/04/2020
59	Period of Performance Start Date *	10/15/2020
60	Period of Performance End Date *	10/15/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 82
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Farley
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52046-0082
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0045 - State Biofuel Grant Program	\$00	\$113,196.00	\$00	\$113,196.00
Total		\$00	\$113,196.00	\$00	\$113,196.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0045 - State Biofuel Grant Program	10/15/2020 10/15/2020	\$113,196.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$113,196.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0045-009X-2093431HO

54	Sub-Recipient Organization (Awardee)*	HOMELAND ENERGY SOLUTION-2093431HO
55	Award Number*	269-0045-009X-2093431HO
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$750,000.00
58	Award Date *	10/04/2020
59	Period of Performance Start Date *	10/15/2020
60	Period of Performance End Date *	11/16/2020
61	Primary Place of Performance Address Line 1 *	PO BOX C
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	LAWLER
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52154-9602
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0045 - State Biofuel Grant Program	\$00	\$750,000.00	\$00	\$750,000.00
Total		\$00	\$750,000.00	\$00	\$750,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0045 - State Biofuel Grant Program	10/15/2020 11/16/2020	\$750,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$750,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0044-009R-2096383BL

54	Sub-Recipient Organization (Awardee)*	BLACK HILLS ENERGY-2096383BL
55	Award Number*	269-0044-009R-2096383BL
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$67,640.00
58	Award Date *	09/09/2020
59	Period of Performance Start Date *	09/10/2020
60	Period of Performance End Date *	12/22/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 6001
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Rapid City
65	Primary Place of Performance State Code *	SD
66	Primary Place of Performance Zip+4 *	57709-6001
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	0
70	Award Description *	To cover utility expenses of qualified small business and residents who fell behind during COVID-19.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0379 - Small Business Relief Grants	\$00	\$67,640.00	\$00	\$67,640.00
Total		\$00	\$67,640.00	\$00	\$67,640.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0379 - Small Business Relief Grants	10/09/2020 12/22/2020	\$67,640.00	Small Business Assistance	
Total:					\$67,640.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A		75 B	75 C	75 D	75 E	
	Project*		Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 269-0047-010D-2096396LU

54	Sub-Recipient Organization (Awardee)*	LUCAS COUNTY FAIR ASSOC-2096396LU
55	Award Number*	269-0047-010D-2096396LU
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$50,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	48495 260th Ave
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Chariton
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50049-8172
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0043-009Q-2099587SA

54	Sub-Recipient Organization (Awardee)*	SALVATION ARMY-2099587SA
55	Award Number*	269-0043-009Q-2099587SA
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$193,411.00
58	Award Date *	12/13/2020
59	Period of Performance Start Date *	12/16/2020
60	Period of Performance End Date *	12/16/2020
61	Primary Place of Performance Address Line 1 *	401 NE Adams St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Peoria
65	Primary Place of Performance State Code *	IL
66	Primary Place of Performance Zip+4 *	61603-4201
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	17
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and supports, and/or to reopen the nonprofit following the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0379 - Small Business Relief Grants	\$00	\$193,411.00	\$00	\$193,411.00
Total		\$00	\$193,411.00	\$00	\$193,411.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0379 - Small Business Relief Grants	12/16/2020 12/16/2020	\$193,411.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$193,411.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0049-010F-2099931TR

54	Sub-Recipient Organization (Awardee)*	TRINITY MEDICAL CENTER-2099931TR
55	Award Number*	269-0049-010F-2099931TR
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$238,046.58
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	2701 17th St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Rock Island
65	Primary Place of Performance State Code *	IL
66	Primary Place of Performance Zip+4 *	61201-5351
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	17
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$238,046.58	\$00	\$238,046.58
Total		\$00	\$238,046.58	\$00	\$238,046.58

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$238,046.58	Public Health Expenses	
Total:					\$238,046.58

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 269-0045-009X-2103831AR

54	Sub-Recipient Organization (Awardee)*	ARCHER DANIELS MIDLAND-2103831AR	
55	Award Number*	269-0045-009X-2103831AR	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$750,000.00
58	Award Date *	10/04/2020	
59	Period of Performance Start Date *	10/15/2020	
60	Period of Performance End Date *	10/15/2020	
61	Primary Place of Performance Address Line 1 *	4666 E Faries Pkwy	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Decatur	
65	Primary Place of Performance State Code *	IL	
66	Primary Place of Performance Zip+4 *	62526-5630	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	13	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0045 - State Biofuel Grant Program	\$00	\$750,000.00	\$00	\$750,000.00
Total		\$00	\$750,000.00	\$00	\$750,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0045 - State Biofuel Grant Program	10/15/2020	10/15/2020	\$750,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:						\$750,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 309-PFAV-0052-2104181

54	Sub-Recipient Organization (Awardee)*	IOWA CENTRAL COMMUNITY COLLEGE-210418110
55	Award Number*	309-PFAV-0052-2104181
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$249,509.68
58	Award Date *	11/15/2020
59	Period of Performance Start Date *	11/16/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	1 Triton Cir
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Fort Dodge
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50501-5729
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$00	\$249,509.68	\$00	\$249,509.68
Total		\$00	\$249,509.68	\$00	\$249,509.68

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	11/16/2020 11/16/2020	\$249,900.00	Items Not Listed Above	Vocational Training
Line 2	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	04/01/2021 06/30/2021	\$-390.32	Items Not Listed Above	Vocational Training
Total:					\$249,509.68

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00		
Total:			\$00			

Sub Screen: Award: 269-0045-009X-2105352WE

54	Sub-Recipient Organization (Awardee)*	WESTERN IOWA ENERGY LLC-2105352WE	
55	Award Number*	269-0045-009X-2105352WE	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$177,170.00
58	Award Date *	10/04/2020	
59	Period of Performance Start Date *	10/15/2020	
60	Period of Performance End Date *	10/15/2020	
61	Primary Place of Performance Address Line 1 *	1220 S Center St	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Wall Lake	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	51466-7038	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	4	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0045 - State Biofuel Grant Program	\$00	\$177,170.00	\$00	\$177,170.00
Total		\$00	\$177,170.00	\$00	\$177,170.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0045 - State Biofuel Grant Program	10/15/2020	10/15/2020	\$177,170.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:						\$177,170.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 21-RFRRP-135/147

54	Sub-Recipient Organization (Awardee)*	FIVE STAR COOPERATIVE-2105668FI
55	Award Number*	21-RFRRP-135/147
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$60,000.00
58	Award Date *	10/12/2020
59	Period of Performance Start Date *	10/28/2020
60	Period of Performance End Date *	12/30/2020
61	Primary Place of Performance Address Line 1 *	1949 N Linn Ave
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	New Hampton
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50659-9406
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	For the construction, installation, upgrade, and retrofit of equipment associated with the sale of renewable fuels to expand markets disrupted by COVID-19.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	\$00	\$60,000.00	\$00	\$60,000.00
Total		\$00	\$60,000.00	\$00	\$60,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	10/28/2020 10/28/2020	\$60,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$60,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A		75 B	75 C	75 D	75 E
	Project*		Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
						Delete
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 21-RFRRP-052/067-068

54	Sub-Recipient Organization (Awardee)*	HANCOCK CO COOP OIL ASSN-2105986HA	
55	Award Number*	21-RFRRP-052/067-068	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$90,000.00
58	Award Date *	10/21/2020	
59	Period of Performance Start Date *	11/13/2020	
60	Period of Performance End Date *	12/30/2020	
61	Primary Place of Performance Address Line 1 *	615 W US Highway 18	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Garner	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50438-1019	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	4	
70	Award Description *	For the construction, installation, upgrade, and retrofit of equipment associated with the sale of renewable fuels to expand markets disrupted by COVID-19.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	\$00	\$90,000.00	\$00	\$90,000.00
Total		\$00	\$90,000.00	\$00	\$90,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Category Description
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	11/13/2020	11/13/2020	\$90,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)
Total:					\$90,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Category Description	Delete
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 269-0047-010D-2105988HA

54	Sub-Recipient Organization (Awardee)*	HARDIN COUNTY AGRICULTUR-2105988HA
55	Award Number*	269-0047-010D-2105988HA
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$50,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 247
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Eldora
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50627-0247
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 269-0047-010D-2106031HO

54	Sub-Recipient Organization (Awardee)*	HOWARD COUNTY AGRICULTUR-2106031HO
55	Award Number*	269-0047-010D-2106031HO
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$75,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 83
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Cresco
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52136-0083
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$75,000.00	\$00	\$75,000.00
Total		\$00	\$75,000.00	\$00	\$75,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$75,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$75,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 21-RFRRP-182-185

54	Sub-Recipient Organization (Awardee)*	HY VEE FOOD STORE-2106037HY	
55	Award Number*	21-RFRRP-182-185	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$120,000.00
58	Award Date *	10/21/2020	
59	Period of Performance Start Date *	11/13/2020	
60	Period of Performance End Date *	12/30/2020	
61	Primary Place of Performance Address Line 1 *	5820 Westown Pkwy	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	West Des Moines	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50266-8223	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	3	
70	Award Description *	For the construction, installation, upgrade, and retrofit of equipment associated with the sale of renewable fuels to expand markets disrupted by COVID-19.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	\$00	\$120,000.00	\$00	\$120,000.00
Total		\$00	\$120,000.00	\$00	\$120,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	11/13/2020	11/13/2020	\$120,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:				\$120,000.00		

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0044-009R-2106184IN

54	Sub-Recipient Organization (Awardee)*	INTERSTATE POWER & LIGHT-2106184IN	
55	Award Number*	269-0044-009R-2106184IN	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$2,419,152.00
58	Award Date *	09/08/2020	
59	Period of Performance Start Date *	09/09/2020	
60	Period of Performance End Date *	02/10/2021	
61	Primary Place of Performance Address Line 1 *	PO BOX 3060	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Cedar Rapids	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52406-3060	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	1	
70	Award Description *	To cover utility expenses of qualified small business and residents who fell behind during COVID-19.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0379 - Small Business Relief Grants	\$00	\$2,419,152.00	\$00	\$2,419,152.00
Total		\$00	\$2,419,152.00	\$00	\$2,419,152.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0379 - Small Business Relief Grants	10/05/2020 12/23/2020	\$2,377,100.00	Small Business Assistance	
Line 2	IA-269-0379 - Small Business Relief Grants	01/13/2021 02/10/2021	\$42,052.00	Small Business Assistance	
Total:					\$2,419,152.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
Total:						\$00

Sub Screen: Award: 269-0047-010D-2106364NO

54	Sub-Recipient Organization (Awardee)*	NORTH IOWA FAIR ASSOC-2106364NO
55	Award Number*	269-0047-010D-2106364NO
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$75,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	3700 4th St SW
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Mason City
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50401-1590
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$75,000.00	\$00	\$75,000.00
Total		\$00	\$75,000.00	\$00	\$75,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$75,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$75,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFAV-0052-2107002

54	Sub-Recipient Organization (Awardee)*	Central College-2107002CE	
55	Award Number*	309-PFAV-0052-2107002	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$209,903.00
58	Award Date *	11/17/2020	
59	Period of Performance Start Date *	11/18/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	812 University St	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Pella	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50219-1902	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	2	
70	Award Description *	Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$00	\$209,903.00	\$00	\$209,903.00
Total		\$00	\$209,903.00	\$00	\$209,903.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	11/18/2020	11/18/2020	\$209,903.00	Items Not Listed Above	Vocational Training
Total:						\$209,903.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 269-0049-010F-2107011FI

54	Sub-Recipient Organization (Awardee)*	FINLEY HOSPITAL-2107011FI
55	Award Number*	269-0049-010F-2107011FI
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$336,129.81
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	350 N Grandview Ave
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Dubuque
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52001-6388
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$336,129.81	\$00	\$336,129.81
Total		\$00	\$336,129.81	\$00	\$336,129.81

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$336,129.81	Public Health Expenses	
Total:					\$336,129.81

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0049-010F-2107016JE

54	Sub-Recipient Organization (Awardee)*	JENNIE EDMUNDSON MEMORIAL HOSPITAL-2107016JE
55	Award Number*	269-0049-010F-2107016JE
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$408,749.93
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	933 E Pierce St Ste 2C
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Council Bluffs
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51503-4626
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$408,749.93	\$00	\$408,749.93
Total		\$00	\$408,749.93	\$00	\$408,749.93

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$408,749.93	Public Health Expenses	
Total:					\$408,749.93

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 269-0049-010F-2107068GR

54	Sub-Recipient Organization (Awardee)*	GREAT RIVER MEDICAL CENTER-2107068GR
55	Award Number*	269-0049-010F-2107068GR
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$458,671.03
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	1221 S Gear Ave
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	West Burlington
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52655-1679
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$458,671.03	\$00	\$458,671.03
Total		\$00	\$458,671.03	\$00	\$458,671.03

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$458,671.03	Public Health Expenses	
Total:					\$458,671.03

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0049-010F-2107154CA

54	Sub-Recipient Organization (Awardee)*	CATHOLIC HEALTH INITIATI-2107154CA
55	Award Number*	269-0049-010F-2107154CA
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$259,572.96
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	1755 59th Pl
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	West Des Moines
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50266-7737
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$259,572.96	\$00	\$259,572.96
Total		\$00	\$259,572.96	\$00	\$259,572.96

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$259,572.96	Public Health Expenses	
Total:					\$259,572.96

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 269-0049-010F-2107158CE

54	Sub-Recipient Organization (Awardee)*	CENTRAL IOWA HOSPITAL CORPORATION-2107158CE
55	Award Number*	269-0049-010F-2107158CE
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$675,107.46
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	1200 Pleasant St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Des Moines
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50309-1406
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$675,107.46	\$00	\$675,107.46
Total		\$00	\$675,107.46	\$00	\$675,107.46

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$675,107.46	Public Health Expenses	
Total:					\$675,107.46

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0049-010F-2107159CE

54	Sub-Recipient Organization (Awardee)*	CENTRAL IOWA HOSPITAL CORPORATION-2107159CE	
55	Award Number*	269-0049-010F-2107159CE	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$1,972,553.45
58	Award Date *	11/22/2020	
59	Period of Performance Start Date *	11/24/2020	
60	Period of Performance End Date *	11/24/2020	
61	Primary Place of Performance Address Line 1 *	1200 Pleasant St	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Des Moines	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50309-1406	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	3	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$1,972,553.45	\$00	\$1,972,553.45
Total		\$00	\$1,972,553.45	\$00	\$1,972,553.45

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020	11/24/2020	\$1,972,553.45	Public Health Expenses	
Total:						\$1,972,553.45

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 269-0049-010F-2107251WI

54	Sub-Recipient Organization (Awardee)*	WINNESHIEK MEDICAL CENTER HOSPITAL-2107251WI	
55	Award Number*	269-0049-010F-2107251WI	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$51,177.50
58	Award Date *	11/22/2020	
59	Period of Performance Start Date *	11/24/2020	
60	Period of Performance End Date *	11/24/2020	
61	Primary Place of Performance Address Line 1 *	901 Montgomery St	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Decorah	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52101-2325	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *		
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$51,177.50	\$00	\$51,177.50
Total		\$00	\$51,177.50	\$00	\$51,177.50

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020	11/24/2020	\$51,177.50	Public Health Expenses	
Total:						\$51,177.50

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 309-PFAV-0052-2107261

54	Sub-Recipient Organization (Awardee)*	WESTERN HOME COMMUNITY-2107261WE	
55	Award Number*	309-PFAV-0052-2107261	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$243,390.00
58	Award Date *	11/23/2020	
59	Period of Performance Start Date *	11/24/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	420 E 11th St	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Cedar Falls	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50613-3364	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	1	
70	Award Description *	Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$00	\$243,390.00	\$00	\$243,390.00
Total		\$00	\$243,390.00	\$00	\$243,390.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	11/24/2020	11/24/2020	\$243,390.00	Items Not Listed Above	Vocational Training
Total:						\$243,390.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 269-0047-010D-2107352LE

54	Sub-Recipient Organization (Awardee)*	LEE COUNTY FAIR INC-2107352LE
55	Award Number*	269-0047-010D-2107352LE
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$75,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 179
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Donnellson
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52625-0179
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$75,000.00	\$00	\$75,000.00
Total		\$00	\$75,000.00	\$00	\$75,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$75,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$75,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 309-PFAV-0052-2107422

54	Sub-Recipient Organization (Awardee)*	ALLEN MEMORIAL HOSPITAL-2107422AL	
55	Award Number*	309-PFAV-0052-2107422	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$199,983.00
58	Award Date *	11/15/2020	
59	Period of Performance Start Date *	11/16/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	1825 Logan Ave	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Waterloo	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50703-1916	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	1	
70	Award Description *	Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$00	\$199,983.00	\$00	\$199,983.00
Total		\$00	\$199,983.00	\$00	\$199,983.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	11/16/2020	11/16/2020	\$199,983.00	Items Not Listed Above	Vocational Training
Total:						\$199,983.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 309-PFAV-0052-2107472

54	Sub-Recipient Organization (Awardee)*	MERCY MEDICAL CENTER-2107472ME
55	Award Number*	309-PFAV-0052-2107472
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$183,560.00
58	Award Date *	11/23/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	701 10th St SE
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Cedar Rapids
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52403-1251
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$00	\$183,560.00	\$00	\$183,560.00
Total		\$00	\$183,560.00	\$00	\$183,560.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	12/15/2020 12/15/2020	\$183,560.00	Items Not Listed Above	Vocational Training
Total:					\$183,560.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00		
Total:			\$00			

Sub Screen: Award: 269-0047-010D-2107538AD

54	Sub-Recipient Organization (Awardee)*	ADAIR COUNTY FAIR ASSN-2107538AD	
55	Award Number*	269-0047-010D-2107538AD	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$50,000.00
58	Award Date *	11/29/2020	
59	Period of Performance Start Date *	12/04/2020	
60	Period of Performance End Date *	12/04/2020	
61	Primary Place of Performance Address Line 1 *	PO BOX 174	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Greenfield	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50849-0174	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	3	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/04/2020	12/04/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:						\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 309-PFAV-0052-2107581

54	Sub-Recipient Organization (Awardee)*	WILLIAM PENN UNIVERSITY-2107581W1	
55	Award Number*	309-PFAV-0052-2107581	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$247,031.00
58	Award Date *	11/18/2020	
59	Period of Performance Start Date *	11/19/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	201 Trueblood Ave	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Oskaloosa	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52577-1757	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	2	
70	Award Description *	Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$00	\$247,031.00	\$00	\$247,031.00
Total		\$00	\$247,031.00	\$00	\$247,031.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	11/19/2020	11/19/2020	\$247,031.00	Items Not Listed Above	Vocational Training
Total:						\$247,031.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 269-0047-010D-2107638GU

54	Sub-Recipient Organization (Awardee)*	GUTHRIE CO AG SOCIETY-2107638GU
55	Award Number*	269-0047-010D-2107638GU
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$50,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 153
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Guthrie Center
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50115-0153
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 269-0049-010F-2107745ST

54	Sub-Recipient Organization (Awardee)*	ST ANTHONY REGIONAL HOSPITAL AND NURSING-2107745ST
55	Award Number*	269-0049-010F-2107745ST
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$171,373.43
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	311 S Clark St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Carroll
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51401-3038
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$171,373.43	\$00	\$171,373.43
Total		\$00	\$171,373.43	\$00	\$171,373.43

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$171,373.43	Public Health Expenses	
Total:					\$171,373.43

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFEH-0052-2107749

54	Sub-Recipient Organization (Awardee)*	ST ANTHONY REGIONAL HOSPITAL AND NURSING-2107749ST
55	Award Number*	309-PFEH-0052-2107749
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$212,033.00
58	Award Date *	11/18/2020
59	Period of Performance Start Date *	11/19/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	406 E Anthony St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Carroll
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51401-3027
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	Funding is supporting the creation and expansion of short-term learn and learn training programs resulting in industry-recognized credentials by providing grants for Expand opportunities for Iowans whose employment has been affected or eliminated because of the Coronavirus pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAEH - Earn and Learn Grants	\$00	\$212,033.00	\$00	\$212,033.00
Total		\$00	\$212,033.00	\$00	\$212,033.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAEH - Earn and Learn Grants	11/19/2020 11/19/2020	\$212,033.00	Items Not Listed Above	Vocational Training
Total:					\$212,033.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 269-0049-010F-2107879SA

54	Sub-Recipient Organization (Awardee)*	SARTORI MEMORIAL HOSP-2107879SA
55	Award Number*	269-0049-010F-2107879SA
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$68,097.07
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	515 College St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Cedar Falls
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50613-2500
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$68,097.07	\$00	\$68,097.07
Total		\$00	\$68,097.07	\$00	\$68,097.07

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$68,097.07	Public Health Expenses	
Total:					\$68,097.07

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0049-010F-2108077SI

54	Sub-Recipient Organization (Awardee)*	SIOUX CENTER HEALTH-2108077SI
55	Award Number*	269-0049-010F-2108077SI
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$56,621.92
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	1101 9th St SE
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Sioux Center
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51250-2501
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$56,621.92	\$00	\$56,621.92
Total		\$00	\$56,621.92	\$00	\$56,621.92

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$56,621.92	Public Health Expenses	
Total:					\$56,621.92

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 309-PFAV-0052-2109477SU

54	Sub-Recipient Organization (Awardee)*	SUNRISE RETIREMENT COMM-2108139SU
55	Award Number*	309-PFAV-0052-2109477SU
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$61,970.31
58	Award Date *	11/15/2020
59	Period of Performance Start Date *	11/16/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	5501 Gordon Dr
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Sioux City
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51106-2008
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$00	\$61,970.31	\$00	\$61,970.31
Total		\$00	\$61,970.31	\$00	\$61,970.31

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	11/16/2020	11/16/2020	\$73,434.00	Items Not Listed Above	Vocational Training
Line 2	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	04/01/2021	06/30/2021	\$-11,463.69	Items Not Listed Above	Vocational Training
Total:				\$61,970.31		

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes						
74	Non-Compliance Explanation									
	75 A		75 B		75 C		75 D	75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description	Delete
Line 1	0				\$00					
Total:					\$00					

Sub Screen: Award: 269-0049-010F-2108419PE

54	Sub-Recipient Organization (Awardee)*	PELLA REGIONAL HEALTH CENTER-2108419PE
55	Award Number*	269-0049-010F-2108419PE
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$88,869.61
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	404 Jefferson St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Pella
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50219-1257
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$88,869.61	\$00	\$88,869.61
Total		\$00	\$88,869.61	\$00	\$88,869.61

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$88,869.61	Public Health Expenses	
Total:					\$88,869.61

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: ACFS-16-196

54	Sub-Recipient Organization (Awardee)*	HAWKEYE AREA COMMUNITY ACTION PROGRAM INC-2109209HA
55	Award Number*	ACFS-16-196
56	Award Payment Method*	Reimbursable
57	Amount of Award *	\$301,400.00
58	Award Date *	05/18/2020
59	Period of Performance Start Date *	05/19/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	1515 Hawkeye Dr
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Hiawatha
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52233-1102
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	Reimbursement for costs associated with the acquisition of food and supplies in response to the coronavirus pandemic emergency. Food products unable to be secured through TEFAP, PPE, items needed for packaging and/or delivery of food products. No employee salary or benefit costs

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-FII2020 - Feeding Iowans Initiative	\$00	\$301,400.00	\$00	\$301,400.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$301,400.00	\$00	\$301,400.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-FII2020 - Feeding Iowans Initiative	12/18/2020 12/18/2020	\$280,280.48	Food Programs	
Line 2	IA-FII2020 - Feeding Iowans Initiative	04/01/2021 06/30/2021	\$21,119.52	Food Programs	
Total:					\$301,400.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00		
Total:			\$00			

Sub Screen: Award: 269-0049-010F-2109295CA

54	Sub-Recipient Organization (Awardee)*	CASS COUNTY MEMORIAL HOS-2109295CA
55	Award Number*	269-0049-010F-2109295CA
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$55,868.07
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	1501 E 10th St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Atlantic
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50022-1936
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$55,868.07	\$00	\$55,868.07
Total		\$00	\$55,868.07	\$00	\$55,868.07

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$55,868.07	Public Health Expenses	
Total:					\$55,868.07

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 309-PFEH-0052-2109372

54	Sub-Recipient Organization (Awardee)*	GOODWILL INDUSTRIES OF THE HEARTLAND-2109372GO	
55	Award Number*	309-PFEH-0052-2109372	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$249,893.00
58	Award Date *	11/18/2020	
59	Period of Performance Start Date *	11/19/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	1410 S 1st Ave	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Iowa City	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52240-6038	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	2	
70	Award Description *	Funding is supporting the creation and expansion of short-term learn and learn training programs resulting in industry-recognized credentials by providing grants for Expand opportunities for Iowans whose employment has been affected or eliminated because of the Coronavirus pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAEH - Earn and Learn Grants	\$00	\$249,893.00	\$00	\$249,893.00
Total		\$00	\$249,893.00	\$00	\$249,893.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAEH - Earn and Learn Grants	11/19/2020 11/19/2020	\$249,893.00	Items Not Listed Above	Vocational Training
Total:					\$249,893.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFAV-0052-2109381

54	Sub-Recipient Organization (Awardee)*	INDIAN HILLS COMMUNITY COLLEGE-2109381IN	
55	Award Number*	309-PFAV-0052-2109381	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$227,045.00
58	Award Date *	11/19/2020	
59	Period of Performance Start Date *	11/20/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	525 Grandview Ave Bldg 1	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Ottumwa	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52501-1359	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	2	
70	Award Description *	Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$00	\$227,045.00	\$00	\$227,045.00
Total		\$00	\$227,045.00	\$00	\$227,045.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	11/20/2020	11/20/2020	\$250,000.00	Items Not Listed Above	Vocational Training
Line 2	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	04/01/2021	06/30/2021	\$-22,955.00	Items Not Listed Above	Vocational Training
Total:						\$227,045.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 309-PFAV-0052-2109410

54	Sub-Recipient Organization (Awardee)*	Eastern Iowa Community College-2109410EA	
55	Award Number*	309-PFAV-0052-2109410	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$165,256.05
58	Award Date *	11/17/2020	
59	Period of Performance Start Date *	11/18/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	101 W 3rd St	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Davenport	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52801-1419	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	2	
70	Award Description *	Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$00	\$165,256.05	\$00	\$165,256.05
Total		\$00	\$165,256.05	\$00	\$165,256.05

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	11/18/2020	11/18/2020	\$201,794.00	Items Not Listed Above	Vocational Training
Line 2	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	04/01/2021	06/30/2021	\$-36,537.95	Items Not Listed Above	Vocational Training
Total:						\$165,256.05

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 309-PFAV-0052-2109432

54	Sub-Recipient Organization (Awardee)*	Kirkwood Community College-2109432KI
55	Award Number*	309-PFAV-0052-2109432
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$250,000.00
58	Award Date *	10/07/2020
59	Period of Performance Start Date *	10/08/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	6301 Kirkwood Blvd SW
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Cedar Rapids
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52404-5260
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAEH - Earn and Learn Grants	\$00	\$250,000.00	\$00	\$250,000.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$250,000.00	\$00	\$250,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAEH - Earn and Learn Grants	10/08/2020	10/08/2020	\$100,000.00	Items Not Listed Above	Vocational Training
Line 2	IA-309-AAEH - Earn and Learn Grants	04/01/2021	06/30/2021	\$150,000.00	Items Not Listed Above	Vocational Training
Total:						\$250,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes				
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:							\$00

Sub Screen: Award: 309-PFAV-0052-2109438

54	Sub-Recipient Organization (Awardee)*	NORTHEAST IOWA COMMUNITY COLLEGE-2109438NO	
55	Award Number*	309-PFAV-0052-2109438	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$250,000.00
58	Award Date *	11/15/2020	
59	Period of Performance Start Date *	11/16/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	PO BOX 400	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Calmar	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52132-0400	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	1	
70	Award Description *	Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$00	\$250,000.00	\$00	\$250,000.00
Total		\$00	\$250,000.00	\$00	\$250,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	11/16/2020	11/16/2020	\$250,000.00	Items Not Listed Above	Vocational Training
Total:						\$250,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 309-PFAV-0052-2109450

54	Sub-Recipient Organization (Awardee)*	IOWA WESTERN COMMUNITY COLLEGE-2109450IO	
55	Award Number*	309-PFAV-0052-2109450	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$146,061.60
58	Award Date *	11/17/2020	
59	Period of Performance Start Date *	11/18/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	2700 College Rd	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Council Bluffs	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	51503-1057	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	3	
70	Award Description *	Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$00	\$146,061.60	\$00	\$146,061.60
Total		\$00	\$146,061.60	\$00	\$146,061.60

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	11/18/2020	11/18/2020	\$172,700.00	Items Not Listed Above	Vocational Training
Line 2	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	04/01/2021	06/30/2021	\$-26,638.40	Items Not Listed Above	Vocational Training
Total:						\$146,061.60

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 309-PFIF-0052-21094540

54	Sub-Recipient Organization (Awardee)*	IOWA WESTERN COMMUNITY COLLEGE-2109454IO
55	Award Number*	309-PFIF-0052-21094540
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$99,000.00
58	Award Date *	11/17/2020
59	Period of Performance Start Date *	11/18/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	2700 College Rd
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Council Bluffs
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51503-1057
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	Due to the coronavirus, the delivery of CEAM Welding and Hydraulic Training is being reconfigured into a hybrid education model. Funding will support the reconfiguration and proposes to enroll 8-27 participants affected by the pandemic to successfully complete the program

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAEH - Earn and Learn Grants	\$00	\$99,000.00	\$00	\$99,000.00
Total		\$00	\$99,000.00	\$00	\$99,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAEH - Earn and Learn Grants	11/18/2020 11/18/2020	\$99,000.00	Items Not Listed Above	Vocational Training
Total:					\$99,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFAV-0052-2109477HA

54	Sub-Recipient Organization (Awardee)*	HAWKEYE COMMUNITY COLLEGE-2109477HA
55	Award Number*	309-PFAV-0052-2109477HA
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$250,000.00
58	Award Date *	11/23/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	1501 E Orange Rd
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Waterloo
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50701-9014
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$00	\$250,000.00	\$00	\$250,000.00
Total		\$00	\$250,000.00	\$00	\$250,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	11/24/2020 11/24/2020	\$250,000.00	Items Not Listed Above	Vocational Training
Total:					\$250,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00		
Total:			\$00			

Sub Screen: Award: 309-PFAV-0052-2109561

54	Sub-Recipient Organization (Awardee)*	SOUTHWESTERN COMMUNITY COLLEGE-2109561SO	
55	Award Number*	309-PFAV-0052-2109561	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$161,817.02
58	Award Date *	11/17/2020	
59	Period of Performance Start Date *	11/18/2020	
60	Period of Performance End Date *	09/30/2021	
61	Primary Place of Performance Address Line 1 *	1501 W Townline St	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Creston	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50801-1042	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *		
70	Award Description *	Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$-2,557.98	\$161,817.02	\$-2,557.98	\$161,817.02
Total		\$-2,557.98	\$161,817.02	\$-2,557.98	\$161,817.02

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	11/18/2020	11/18/2020	\$164,375.00	Items Not Listed Above	Vocational Training
Total:						\$164,375.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	07/01/2021	09/30/2021	\$-2,557.98	Items Not Listed Above	Vocational Training
Total:						\$-2,557.98

Sub Screen: Award: 309-PFAV-0052-2109614

54	Sub-Recipient Organization (Awardee)*	IOWA LAKES COMMUNITY COLLEGE-2109614IO
55	Award Number*	309-PFAV-0052-2109614
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$249,852.00
58	Award Date *	11/17/2020
59	Period of Performance Start Date *	11/18/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	19 S 7th St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Estherville
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51334-2234
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$00	\$249,852.00	\$00	\$249,852.00
Total		\$00	\$249,852.00	\$00	\$249,852.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	11/18/2020 11/18/2020	\$249,852.00	Items Not Listed Above	Vocational Training
Total:					\$249,852.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00		
Total:			\$00			

Sub Screen: Award: 309-PFAV-0052-2109627

54	Sub-Recipient Organization (Awardee)*	NORTH IOWA AREA COMMUNITY COLLEGE-2109627NO	
55	Award Number*	309-PFAV-0052-2109627	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$136,338.91
58	Award Date *	11/19/2020	
59	Period of Performance Start Date *	11/20/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	500 College Dr	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Mason City	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50401-7213	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *		
70	Award Description *	Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$00	\$136,338.91	\$00	\$136,338.91
Total		\$00	\$136,338.91	\$00	\$136,338.91

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	11/20/2020	11/20/2020	\$250,000.00	Items Not Listed Above	Vocational Training
Line 2	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	04/01/2021	06/30/2021	\$-113,661.09	Items Not Listed Above	Vocational Training
Total:						\$136,338.91

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 21-RFRRP-136-137

54	Sub-Recipient Organization (Awardee)*	ELLIOTT OIL-2109664EL	
55	Award Number*	21-RFRRP-136-137	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$60,000.00
58	Award Date *	10/11/2020	
59	Period of Performance Start Date *	11/05/2020	
60	Period of Performance End Date *	12/30/2020	
61	Primary Place of Performance Address Line 1 *	PO BOX 473	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Ottumwa	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52501-0473	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	2	
70	Award Description *	For the construction, installation, upgrade, and retrofit of equipment associated with the sale of renewable fuels to expand markets disrupted by COVID-19.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	\$00	\$60,000.00	\$00	\$60,000.00
Total		\$00	\$60,000.00	\$00	\$60,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	11/05/2020	11/05/2020	\$60,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:				\$60,000.00		

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 21-RFRRP-069-128

54	Sub-Recipient Organization (Awardee)*	CASEYS GENERAL STORES-2109737CA
55	Award Number*	21-RFRRP-069-128
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$1,593,880.00
58	Award Date *	10/08/2020
59	Period of Performance Start Date *	10/22/2020
60	Period of Performance End Date *	12/30/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 3002
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Ankeny
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50021-8046
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	For the construction, installation, upgrade, and retrofit of equipment associated with the sale of renewable fuels to expand markets disrupted by COVID-19.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	\$00	\$1,593,880.00	\$00	\$1,593,880.00
Total		\$00	\$1,593,880.00	\$00	\$1,593,880.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	10/22/2020 10/22/2020	\$1,593,880.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$1,593,880.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A		75 B	75 C	75 D	75 E
	Project*		Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description>Delete
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 269-0047-010D-2109904JO

54	Sub-Recipient Organization (Awardee)*	JOHNSON COUNTY AG ASSOC-2109904JO
55	Award Number*	269-0047-010D-2109904JO
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$75,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	4261 Oak Crest Hill Rd SE
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Iowa City
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52246-5824
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$75,000.00	\$00	\$75,000.00
Total		\$00	\$75,000.00	\$00	\$75,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$75,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$75,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0049-010F-2110881KO

54	Sub-Recipient Organization (Awardee)*	KOSSUTH COUNTY HOSPITAL-2110881KO
55	Award Number*	269-0049-010F-2110881KO
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$64,830.42
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	1515 S Phillips St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Algona
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50511-3649
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$64,830.42	\$00	\$64,830.42
Total		\$00	\$64,830.42	\$00	\$64,830.42

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$64,830.42	Public Health Expenses	
Total:					\$64,830.42

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 269-0049-010F-2111252NO

54	Sub-Recipient Organization (Awardee)*	NORTHWEST IOWA HOSPITAL CORP-2111252NO	
55	Award Number*	269-0049-010F-2111252NO	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$679,211.72
58	Award Date *	11/22/2020	
59	Period of Performance Start Date *	11/24/2020	
60	Period of Performance End Date *	11/24/2020	
61	Primary Place of Performance Address Line 1 *	2720 Stone Park Blvd	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Sioux City	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	51104-3734	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *		
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$679,211.72	\$00	\$679,211.72
Total		\$00	\$679,211.72	\$00	\$679,211.72

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020	11/24/2020	\$679,211.72	Public Health Expenses	
Total:						\$679,211.72

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 309-PFAV-0052-2111270

54	Sub-Recipient Organization (Awardee)*	WHITING COMMERCIAL DEVEL-2111270WH	
55	Award Number*	309-PFAV-0052-2111270	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$250,000.00
58	Award Date *	11/15/2020	
59	Period of Performance Start Date *	11/16/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	200 Shannon Dr	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Whiting	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	51063-1021	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	4	
70	Award Description *	Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$00	\$250,000.00	\$00	\$250,000.00
Total		\$00	\$250,000.00	\$00	\$250,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	11/16/2020	11/16/2020	\$250,000.00	Items Not Listed Above	Vocational Training
Total:						\$250,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 269-0047-010D-2111291WE

54	Sub-Recipient Organization (Awardee)*	WESTFAIR ASSOCIATIONS-2111291WE
55	Award Number*	269-0047-010D-2111291WE
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$75,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 698
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Council Bluffs
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51502-0698
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$75,000.00	\$00	\$75,000.00
Total		\$00	\$75,000.00	\$00	\$75,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$75,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$75,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 21-RFRRP-027-034

54	Sub-Recipient Organization (Awardee)*	COUNTRY STORES OF CARROLL LTD-2111773CO
55	Award Number*	21-RFRRP-027-034
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$239,920.00
58	Award Date *	10/22/2020
59	Period of Performance Start Date *	11/06/2020
60	Period of Performance End Date *	12/30/2020
61	Primary Place of Performance Address Line 1 *	624 N Crawford St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Carroll
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51401-2216
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	For the construction, installation, upgrade, and retrofit of equipment associated with the sale of renewable fuels to expand markets disrupted by COVID-19.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	\$00	\$239,920.00	\$00	\$239,920.00
Total		\$00	\$239,920.00	\$00	\$239,920.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	11/06/2020 11/06/2020	\$239,920.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$239,920.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A		75 B	75 C	75 D	75 E
	Project*		Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description>Delete
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 269-0043-009Q-2112223NE

54	Sub-Recipient Organization (Awardee)*	NEIGHBORHOOD CENTERS OF JOHNSON COUNTY IOWA-2112223NE	
55	Award Number*	269-0043-009Q-2112223NE	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$58,180.00
58	Award Date *	11/24/2020	
59	Period of Performance Start Date *	12/03/2020	
60	Period of Performance End Date *	12/03/2020	
61	Primary Place of Performance Address Line 1 *	PO BOX 2491	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Iowa City	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52244-2491	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *		
70	Award Description *	To support organizations providing volunteer infrastructure including Volunteer Center, Mentoring, and RSVP programs, as well as community-based organizations with established trust and history of serving communities of color.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0379 - Small Business Relief Grants	\$00	\$58,180.00	\$00	\$58,180.00
Total		\$00	\$58,180.00	\$00	\$58,180.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Category Description
Line 1	IA-269-0379 - Small Business Relief Grants	12/03/2020	12/03/2020	\$58,180.00	Economic Support (Other than Small Business, Housing, and Food Assistance)
Total:					\$58,180.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 269-0047-010D-2112794MA

54	Sub-Recipient Organization (Awardee)*	MADISON CO LIVESTOCK&FAI-2112794MA
55	Award Number*	269-0047-010D-2112794MA
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$75,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 542
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Winterset
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50273-0542
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$75,000.00	\$00	\$75,000.00
Total		\$00	\$75,000.00	\$00	\$75,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$75,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$75,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0049-010F-2113069MO

54	Sub-Recipient Organization (Awardee)*	MONTGOMERY COUNTY MEMORIAL HOSPITAL-2113069MO
55	Award Number*	269-0049-010F-2113069MO
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$62,903.93
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 498
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Red Oak
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51566-0498
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$62,903.93	\$00	\$62,903.93
Total		\$00	\$62,903.93	\$00	\$62,903.93

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$62,903.93	Public Health Expenses	
Total:					\$62,903.93

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 21-RFRRP-226-234

54	Sub-Recipient Organization (Awardee)*	COBB OIL CO-2113245CO
55	Award Number*	21-RFRRP-226-234
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$270,000.00
58	Award Date *	10/25/2020
59	Period of Performance Start Date *	12/15/2020
60	Period of Performance End Date *	12/30/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 178
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Brighton
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52540-0178
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	For the construction, installation, upgrade, and retrofit of equipment associated with the sale of renewable fuels to expand markets disrupted by COVID-19.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	\$00	\$270,000.00	\$00	\$270,000.00
Total		\$00	\$270,000.00	\$00	\$270,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	12/15/2020 12/15/2020	\$270,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$270,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A		75 B	75 C	75 D	75 E
	Project*		Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description>Delete
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 21-RFRRP-044-051

54	Sub-Recipient Organization (Awardee)*	REIF OIL COMPANY-2113330RE
55	Award Number*	21-RFRRP-044-051
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$203,395.00
58	Award Date *	10/07/2020
59	Period of Performance Start Date *	10/22/2020
60	Period of Performance End Date *	12/30/2020
61	Primary Place of Performance Address Line 1 *	801 N 3rd St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Burlington
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52601-5006
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	For the construction, installation, upgrade, and retrofit of equipment associated with the sale of renewable fuels to expand markets disrupted by COVID-19.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	\$00	\$203,395.00	\$00	\$203,395.00
Total		\$00	\$203,395.00	\$00	\$203,395.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	10/22/2020 10/22/2020	\$203,395.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$203,395.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A		75 B	75 C	75 D	75 E
	Project*		Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
						Delete
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 269-0043-009Q-2113576DO

54	Sub-Recipient Organization (Awardee)*	DOMESTIC VIOLENCE INTERVENTION PROGRAM INC-2113576DO
55	Award Number*	269-0043-009Q-2113576DO
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$60,000.00
58	Award Date *	10/08/2020
59	Period of Performance Start Date *	11/02/2020
60	Period of Performance End Date *	11/02/2020
61	Primary Place of Performance Address Line 1 *	1105 Gilbert Ct Ste 300
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Iowa City
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52240-4536
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and supports, and/or to reopen the nonprofit following the COVID-19 pandemic. This grant was targeted to shelters.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0379 - Small Business Relief Grants	\$00	\$60,000.00	\$00	\$60,000.00
Total		\$00	\$60,000.00	\$00	\$60,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0379 - Small Business Relief Grants	11/02/2020 11/02/2020	\$60,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$60,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes				
74	Non-Compliance Explanation							
	75 A		75 B		75 C	75 D	75 E	
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0				\$00			
Total:				\$00				

Sub Screen: Award: 269-0047-010D-2114968PO

54	Sub-Recipient Organization (Awardee)*	POCAHONTAS COUNTY FAIR-2114968PO
55	Award Number*	269-0047-010D-2114968PO
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$50,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	57837 220th Ave
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Pocahontas
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50574-8548
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0047-010D-2115828UN

54	Sub-Recipient Organization (Awardee)*	UNION COUNTY FAIR ASSOCI-2115828UN
55	Award Number*	269-0047-010D-2115828UN
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$50,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 283
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Creston
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50801-0283
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0047-010D-2116132LI

54	Sub-Recipient Organization (Awardee)*	LINN CO FAIRBOARD-2116132LI	
55	Award Number*	269-0047-010D-2116132LI	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$75,000.00
58	Award Date *	11/29/2020	
59	Period of Performance Start Date *	12/01/2020	
60	Period of Performance End Date *	12/01/2020	
61	Primary Place of Performance Address Line 1 *	PO BOX 329	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Central City	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52214-0329	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	1	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$75,000.00	\$00	\$75,000.00
Total		\$00	\$75,000.00	\$00	\$75,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020	12/01/2020	\$75,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:						\$75,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 269-0049-010F-2116792CO

54	Sub-Recipient Organization (Awardee)*	COVENANT MEDICAL CENTER-2116792CO	
55	Award Number*	269-0049-010F-2116792CO	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$571,663.58
58	Award Date *	11/22/2020	
59	Period of Performance Start Date *	11/24/2020	
60	Period of Performance End Date *	11/24/2020	
61	Primary Place of Performance Address Line 1 *	3421 W 9th St	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Waterloo	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50702-5401	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	1	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$571,663.58	\$00	\$571,663.58
Total		\$00	\$571,663.58	\$00	\$571,663.58

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020	11/24/2020	\$571,663.58	Public Health Expenses	
Total:						\$571,663.58

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 309-PFEH-0052-2116818

54	Sub-Recipient Organization (Awardee)*	Four Mounds Foundation-2116818FO
55	Award Number*	309-PFEH-0052-2116818
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$122,037.00
58	Award Date *	11/18/2020
59	Period of Performance Start Date *	11/19/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	4900 Peru Rd
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Dubuque
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52001-8304
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	Funding is supporting the creation and expansion of short-term learn and learn training programs resulting in industry-recognized credentials by providing grants for Expand opportunities for Iowans whose employment has been affected or eliminated because of the Coronavirus pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAEH - Earn and Learn Grants	\$00	\$122,037.00	\$00	\$122,037.00
Total		\$00	\$122,037.00	\$00	\$122,037.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAEH - Earn and Learn Grants	11/19/2020 11/19/2020	\$122,037.00	Items Not Listed Above	Vocational Training
Total:					\$122,037.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0047-010D-2117183DE

54	Sub-Recipient Organization (Awardee)*	DECATUR CO FAIR BOARD-2117183DE
55	Award Number*	269-0047-010D-2117183DE
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$50,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	309 N Main St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Leon
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50144-1451
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0043-009Q-2117417MI

54	Sub-Recipient Organization (Awardee)*	MICAH HOUSE CORP-2117417MI
55	Award Number*	269-0043-009Q-2117417MI
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$72,000.00
58	Award Date *	10/06/2020
59	Period of Performance Start Date *	11/02/2020
60	Period of Performance End Date *	11/02/2020
61	Primary Place of Performance Address Line 1 *	1415 Avenue J
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Council Bluffs
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51501-1168
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and supports, and/or to reopen the nonprofit following the COVID-19 pandemic. This grant was targeted to shelters.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0379 - Small Business Relief Grants	\$00	\$72,000.00	\$00	\$72,000.00
Total		\$00	\$72,000.00	\$00	\$72,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0379 - Small Business Relief Grants	11/02/2020 11/02/2020	\$72,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$72,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 269-0043-009Q-2117879HO

54	Sub-Recipient Organization (Awardee)*	HOMES OF OAKRIDGE HUMAN-2117879HO
55	Award Number*	269-0043-009Q-2117879HO
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$125,000.00
58	Award Date *	11/23/2020
59	Period of Performance Start Date *	12/03/2020
60	Period of Performance End Date *	12/07/2020
61	Primary Place of Performance Address Line 1 *	1401 Center St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Des Moines
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50314-2285
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	To support organizations providing volunteer infrastructure including Volunteer Center, Mentoring, and RSVP programs, as well as community-based organizations with established trust and history of serving communities of color.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0379 - Small Business Relief Grants	\$00	\$125,000.00	\$00	\$125,000.00
Total		\$00	\$125,000.00	\$00	\$125,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0379 - Small Business Relief Grants	12/03/2020 12/07/2020	\$125,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$125,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0044-009R-2118011EN

54	Sub-Recipient Organization (Awardee)*	ENERGY GROUP CO INC THE-2118011EN
55	Award Number*	269-0044-009R-2118011EN
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$69,364.00
58	Award Date *	12/22/2020
59	Period of Performance Start Date *	12/23/2020
60	Period of Performance End Date *	12/23/2020
61	Primary Place of Performance Address Line 1 *	2704 Easton Blvd
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Des Moines
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50317-6124
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	To cover utility expenses of qualified small business and residents who fell behind during COVID-19.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0379 - Small Business Relief Grants	\$00	\$69,364.00	\$00	\$69,364.00
Total		\$00	\$69,364.00	\$00	\$69,364.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0379 - Small Business Relief Grants	12/23/2020 12/23/2020	\$69,364.00	Small Business Assistance	
Total:					\$69,364.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A		75 B	75 C	75 D	75 E	
	Project*		Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 269-0047-010D-2118458BR

54	Sub-Recipient Organization (Awardee)*	BREMER COUNTY FAIR ASSOC-2118458BR
55	Award Number*	269-0047-010D-2118458BR
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$75,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	2771 150th St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Sumner
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50674-9076
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$75,000.00	\$00	\$75,000.00
Total		\$00	\$75,000.00	\$00	\$75,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$75,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$75,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0049-010F-2118516ME

54	Sub-Recipient Organization (Awardee)*	MERCY MEDICAL CENTER CLINTON-2118516ME
55	Award Number*	269-0049-010F-2118516ME
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$204,123.68
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	1410 N 4th St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Clinton
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52732-2940
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$204,123.68	\$00	\$204,123.68
Total		\$00	\$204,123.68	\$00	\$204,123.68

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$204,123.68	Public Health Expenses	
Total:					\$204,123.68

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 269-0049-010F-2118831MA

54	Sub-Recipient Organization (Awardee)*	MARY GREELEY MEDICAL CTR-2118831MA
55	Award Number*	269-0049-010F-2118831MA
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$668,741.69
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	1111 Duff Ave
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Ames
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50010-5745
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$668,741.69	\$00	\$668,741.69
Total		\$00	\$668,741.69	\$00	\$668,741.69

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$668,741.69	Public Health Expenses	
Total:					\$668,741.69

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: ACFS-16-191

54	Sub-Recipient Organization (Awardee)*	FOOD BANK OF SIOUXLAND-2119879FO	
55	Award Number*	ACFS-16-191	
56	Award Payment Method*	Reimbursable	
57	Amount of Award *		\$138,600.00
58	Award Date *	05/18/2020	
59	Period of Performance Start Date *	05/19/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	1313 11th St	
62	Primary Place of Performance Address Line 2	Ste 1	
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Sioux City	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	51105-1720	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	4	
70	Award Description *	Reimbursement for costs associated with the acquisition of food and supplies in response to the coronavirus pandemic emergency. Food products unable to be secured through TEFAP, PPE, items needed for packaging and/or delivery of food products. No employee salary or benefit costs	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-FII2020 - Feeding Iowans Initiative	\$00	\$138,600.00	\$00	\$138,600.00
Line 2	0	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$138,600.00	\$00	\$138,600.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-FII2020 - Feeding Iowans Initiative	12/18/2020	12/18/2020	\$116,336.32	Food Programs	
Line 2	IA-FII2020 - Feeding Iowans Initiative	04/01/2021	06/30/2021	\$22,263.68	Food Programs	
Total:				\$138,600.00		

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
Total:						\$00

Sub Screen: Award: 269-0043-009Q-2120267CE

54	Sub-Recipient Organization (Awardee)*	CENTRAL IOWA SHELTER & SERVICES-2120267CE
55	Award Number*	269-0043-009Q-2120267CE
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$150,000.00
58	Award Date *	10/07/2020
59	Period of Performance Start Date *	11/02/2020
60	Period of Performance End Date *	11/20/2020
61	Primary Place of Performance Address Line 1 *	1420 Mulberry St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Des Moines
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50309-3618
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and supports, and/or to reopen the nonprofit following the COVID-19 pandemic. This grant was targeted to shelters.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0379 - Small Business Relief Grants	\$00	\$150,000.00	\$00	\$59,620.00
Total		\$00	\$150,000.00	\$00	\$59,620.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0379 - Small Business Relief Grants	11/20/2020 11/20/2020	\$59,620.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$59,620.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A		75 B	75 C	75 D	75 E
	Project*		Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 309-PFEH-0052-2120267

54	Sub-Recipient Organization (Awardee)*	CENTRAL IOWA SHELTER & SERVICES-2120267CE
55	Award Number*	309-PFEH-0052-2120267
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$59,620.00
58	Award Date *	11/19/2020
59	Period of Performance Start Date *	11/20/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	1420 Mulberry St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Des Moines
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50309-3618
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	Funding is supporting the creation and expansion of short-term learn and learn training programs resulting in industry-recognized credentials by providing grants for Expand opportunities for Iowans whose employment has been affected or eliminated because of the Coronavirus pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAEH - Earn and Learn Grants	\$00	\$59,620.00	\$00	\$59,620.00
Total		\$00	\$59,620.00	\$00	\$59,620.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAEH - Earn and Learn Grants	11/20/2020 11/20/2020	\$59,620.00	Items Not Listed Above	Vocational Training
Total:					\$59,620.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 269-0043-009Q-2120371CH

54	Sub-Recipient Organization (Awardee)*	CHILDREN & FAMILY URBAN MINISTRIES-2120371CH
55	Award Number*	269-0043-009Q-2120371CH
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$79,291.00
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	12/03/2020
60	Period of Performance End Date *	12/03/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 41125
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Des Moines
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50311-0503
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	To support organizations providing volunteer infrastructure including Volunteer Center, Mentoring, and RSVP programs, as well as community-based organizations with established trust and history of serving communities of color.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0379 - Small Business Relief Grants	\$00	\$79,291.00	\$00	\$79,291.00
Total		\$00	\$79,291.00	\$00	\$79,291.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0379 - Small Business Relief Grants	12/03/2020 12/03/2020	\$79,291.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$79,291.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 269-0049-010F-2121245GE

54	Sub-Recipient Organization (Awardee)*	GENESIS HEALTH SYSTEM-2121245GE	
55	Award Number*	269-0049-010F-2121245GE	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$1,239,148.86
58	Award Date *	11/22/2020	
59	Period of Performance Start Date *	11/24/2020	
60	Period of Performance End Date *	11/24/2020	
61	Primary Place of Performance Address Line 1 *	1227 E Rusholme St	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Davenport	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52803-2459	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	2	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$1,239,148.86	\$00	\$1,239,148.86
Total		\$00	\$1,239,148.86	\$00	\$1,239,148.86

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020	11/24/2020	\$1,239,148.86	Public Health Expenses	
Total:						\$1,239,148.86

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 269-0044-009R-2121533MI

54	Sub-Recipient Organization (Awardee)*	MIDAMERICAN ENERGY CO-2121533MI
55	Award Number*	269-0044-009R-2121533MI
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$1,376,777.00
58	Award Date *	09/08/2020
59	Period of Performance Start Date *	09/09/2020
60	Period of Performance End Date *	12/23/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 8020
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Davenport
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52808-8020
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	To cover utility expenses of qualified small business and residents who fell behind during COVID-19.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0379 - Small Business Relief Grants	\$00	\$1,376,777.00	\$00	\$1,376,777.00
Total		\$00	\$1,376,777.00	\$00	\$1,376,777.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0379 - Small Business Relief Grants	10/05/2020 12/23/2020	\$1,376,777.00	Small Business Assistance	
Total:					\$1,376,777.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 269-0049-010F-2122056ME

54	Sub-Recipient Organization (Awardee)*	MERCY HEALTH SERVICES-2122056ME
55	Award Number*	269-0049-010F-2122056ME
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$547,624.39
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	250 Mercy Dr
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Dubuque
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52001-7320
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$547,624.39	\$00	\$547,624.39
Total		\$00	\$547,624.39	\$00	\$547,624.39

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$547,624.39	Public Health Expenses	
Total:					\$547,624.39

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 21-RFRRP-019-026

54	Sub-Recipient Organization (Awardee)*	CSOI CORP-2122755CS	
55	Award Number*	21-RFRRP-019-026	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$240,000.00
58	Award Date *	10/07/2020	
59	Period of Performance Start Date *	11/13/2020	
60	Period of Performance End Date *	12/30/2020	
61	Primary Place of Performance Address Line 1 *	101 S Jefferson Way	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Indianola	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50125-2619	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	3	
70	Award Description *	For the construction, installation, upgrade, and retrofit of equipment associated with the sale of renewable fuels to expand markets disrupted by COVID-19.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	\$00	\$240,000.00	\$00	\$240,000.00
Total		\$00	\$240,000.00	\$00	\$240,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	11/13/2020	11/13/2020	\$240,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:				\$240,000.00		

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0045-009X-2125644QU

54	Sub-Recipient Organization (Awardee)*	QUAD COUNTY CORN PROCESS-2125644QU
55	Award Number*	269-0045-009X-2125644QU
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$173,589.00
58	Award Date *	10/04/2020
59	Period of Performance Start Date *	10/15/2020
60	Period of Performance End Date *	10/15/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 208
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Galva
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51020-0208
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0045 - State Biofuel Grant Program	\$00	\$173,589.00	\$00	\$173,589.00
Total		\$00	\$173,589.00	\$00	\$173,589.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0045 - State Biofuel Grant Program	10/15/2020 10/15/2020	\$173,589.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$173,589.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 21-RFRRP-139-142

54	Sub-Recipient Organization (Awardee)*	R K FUELS INC-2126609RK	
55	Award Number*	21-RFRRP-139-142	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$120,000.00
58	Award Date *	10/24/2020	
59	Period of Performance Start Date *	11/05/2020	
60	Period of Performance End Date *	12/30/2020	
61	Primary Place of Performance Address Line 1 *	PO BOX 26	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Diagonal	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50845-0026	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	3	
70	Award Description *	For the construction, installation, upgrade, and retrofit of equipment associated with the sale of renewable fuels to expand markets disrupted by COVID-19.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	\$00	\$120,000.00	\$00	\$120,000.00
Total		\$00	\$120,000.00	\$00	\$120,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	11/05/2020	11/05/2020	\$120,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:				\$120,000.00		

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFAV-0052-2127105

54	Sub-Recipient Organization (Awardee)*	CLEAR LAKE COMM SCH DIST-2127105CL	
55	Award Number*	309-PFAV-0052-2127105	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$50,000.00
58	Award Date *	11/23/2020	
59	Period of Performance Start Date *	11/24/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	1529 3rd Ave N	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Clear Lake	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50428-2111	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *		
70	Award Description *	Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	11/24/2020	11/24/2020	\$50,000.00	Items Not Listed Above	Vocational Training
Total:						\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 309-PFAV-0052-2127109

54	Sub-Recipient Organization (Awardee)*	COUNCIL BLUFFS COMM SCHOOL-2127109CO	
55	Award Number*	309-PFAV-0052-2127109	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *	\$0.00	
58	Award Date *	11/15/2020	
59	Period of Performance Start Date *	11/16/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	300 W Broadway Ste 1600	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Council Bluffs	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	51503-9054	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	3	
70	Award Description *	<p>Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.</p>	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$0.00	\$00	\$0.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	11/16/2020	11/16/2020	\$50,000.00	Items Not Listed Above	Vocational Training
Line 2	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	04/01/2021	06/30/2021	\$-50,000.00	Items Not Listed Above	Vocational Training
Total:						\$0.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 309-PFAV-0052-2127121

54	Sub-Recipient Organization (Awardee)*	DAVENPORT COMM SCH DIST-2127121DA	
55	Award Number*	309-PFAV-0052-2127121	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *	\$50,000.00	
58	Award Date *	11/15/2020	
59	Period of Performance Start Date *	11/16/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	1702 N Main St	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Davenport	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52803-4845	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	2	
70	Award Description *	<p>Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.</p>	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	11/16/2020	11/16/2020	\$50,000.00	Items Not Listed Above	Vocational Training
Total:						\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 5832127317202012311

54	Sub-Recipient Organization (Awardee)*	WAUKEE COMMUNITY SCHOOL DISTRICT-2127317WA
55	Award Number*	5832127317202012311
56	Award Payment Method*	Reimbursable
57	Amount of Award *	\$0.00
58	Award Date *	03/02/2020
59	Period of Performance Start Date *	03/03/2020
60	Period of Performance End Date *	08/27/2021
61	Primary Place of Performance Address Line 1 *	560 SE University Ave
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Waukee
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50263-8683
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	COVID expenses as match to FEMA Public Assistance federal award

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-583-0011 - Local FEMA PA Match	\$-92,895.84	\$0.00	\$-92,895.84	\$0.00
Total		\$-92,895.84	\$0.00	\$-92,895.84	\$0.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-583-0011 - Local FEMA PA Match	12/29/2020 12/30/2020	\$92,895.84	Items Not Listed Above	Pass through match
Total:					\$92,895.84

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes				
74	Non-Compliance Explanation							
	75 A		75 B		75 C	75 D	75 E	
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	IA-583-0011 - Local FEMA PA Match		07/09/2021	08/27/2021	\$-92,895.84	Items Not Listed Above	Pass through match	
Total:					\$-92,895.84			

Sub Screen: Award: 269-ISUV-006C-2127464ST

54	Sub-Recipient Organization (Awardee)*	IOWA STATE UNIVERSITY-2127464ST
55	Award Number*	269-ISUV-006C-2127464ST
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$2,150,000.00
58	Award Date *	11/15/2020
59	Period of Performance Start Date *	11/16/2020
60	Period of Performance End Date *	12/21/2020
61	Primary Place of Performance Address Line 1 *	2221 Wanda Daley Dr
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Ames
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50011-3632
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-ISUV - Nano Vaccine Development	\$00	\$2,150,000.00	\$00	\$2,150,000.00
Total		\$00	\$2,150,000.00	\$00	\$2,150,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-ISUV - Nano Vaccine Development	11/16/2020 12/21/2020	\$2,150,000.00	Public Health Expenses	
Total:					\$2,150,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 5832127875202012311

54	Sub-Recipient Organization (Awardee)*	LINN CO EMA-2127875LI
55	Award Number*	5832127875202012311
56	Award Payment Method*	Reimbursable
57	Amount of Award *	\$0.00
58	Award Date *	04/13/2020
59	Period of Performance Start Date *	04/14/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	6301 Kirkwood Blvd SW
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Cedar Rapids
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52404-5260
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	COVID expenses as match to FEMA Public Assistance federal award

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-583-0011 - Local FEMA PA Match	\$00	\$0.00	\$00	\$0.00
Total		\$00	\$0.00	\$00	\$0.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-583-0011 - Local FEMA PA Match	12/17/2020 12/17/2020	\$54,829.00	Items Not Listed Above	Pass through match
Line 2	IA-583-0011 - Local FEMA PA Match	04/14/2021 04/14/2021	\$-54,829.00	Items Not Listed Above	Pass through match
Total:					\$0.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00		
Total:			\$00			

Sub Screen: Award: 269-0044-009R-2128586DE

54	Sub-Recipient Organization (Awardee)*	DES MOINES WATER WORKS-2128586DE
55	Award Number*	269-0044-009R-2128586DE
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$80,036.00
58	Award Date *	11/05/2020
59	Period of Performance Start Date *	11/06/2020
60	Period of Performance End Date *	12/23/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 9227
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Des Moines
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50306-9227
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	To cover utility expenses of qualified small business and residents who fell behind during COVID-19.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0379 - Small Business Relief Grants	\$00	\$80,036.00	\$00	\$80,036.00
Total		\$00	\$80,036.00	\$00	\$80,036.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0379 - Small Business Relief Grants	11/06/2020 12/23/2020	\$80,036.00	Small Business Assistance	
Total:					\$80,036.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0047-010D-2128598ST

54	Sub-Recipient Organization (Awardee)*	IOWA STATE FAIR-2128598ST
55	Award Number*	269-0047-010D-2128598ST
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$1,000,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/11/2020
60	Period of Performance End Date *	12/11/2020
61	Primary Place of Performance Address Line 1 *	3000 E Grand Ave
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Des Moines
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50317-2465
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$1,000,000.00	\$00	\$1,000,000.00
Total		\$00	\$1,000,000.00	\$00	\$1,000,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/11/2020 12/11/2020	\$1,000,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$1,000,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 5832128743202012311

54	Sub-Recipient Organization (Awardee)*	DUBUQUE COUNTY-2128743DU
55	Award Number*	5832128743202012311
56	Award Payment Method*	Reimbursable
57	Amount of Award *	\$0.00
58	Award Date *	02/29/2020
59	Period of Performance Start Date *	03/01/2020
60	Period of Performance End Date *	07/20/2021
61	Primary Place of Performance Address Line 1 *	720 Central Ave
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Dubuque
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52001-7079
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	COVID expenses as match to FEMA Public Assistance federal award

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-583-0011 - Local FEMA PA Match	\$-95,078.85	\$0.00	\$-95,078.85	\$0.00
Total		\$-95,078.85	\$0.00	\$-95,078.85	\$0.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-583-0011 - Local FEMA PA Match	12/17/2020 12/17/2020	\$95,078.85	Items Not Listed Above	Pass through match
Total:					\$95,078.85

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	IA-583-0011 - Local FEMA PA Match		07/20/2021	07/20/2021	\$-95,078.85		Items Not Listed Above		Pass through match		
Total:					\$-95,078.85						

Sub Screen: Award: 269-0047-010D-2128895JE

54	Sub-Recipient Organization (Awardee)*	JEFFERSON CO TREASURER-2128895JE	
55	Award Number*	269-0047-010D-2128895JE	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$100,000.00
58	Award Date *	11/29/2020	
59	Period of Performance Start Date *	12/01/2020	
60	Period of Performance End Date *	01/11/2021	
61	Primary Place of Performance Address Line 1 *	COURTHOUSE	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	FAIRFIELD	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52556	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *		
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$100,000.00	\$00	\$100,000.00
Total		\$00	\$100,000.00	\$00	\$100,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020	12/01/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)
Line 2	IA-269-0047 - Iowa County Fair Relief Program	01/11/2021	01/11/2021	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)
Total:					\$100,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
Total:						\$00

Sub Screen: Award: 5832129305202012311

54	Sub-Recipient Organization (Awardee)*	JOHNSON CO EMA-2129305JO
55	Award Number*	5832129305202012311
56	Award Payment Method*	Reimbursable
57	Amount of Award *	\$0.00
58	Award Date *	03/02/2020
59	Period of Performance Start Date *	03/03/2020
60	Period of Performance End Date *	07/13/2021
61	Primary Place of Performance Address Line 1 *	4529 Melrose Ave
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Iowa City
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52246-9400
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	COVID expenses as match to FEMA Public Assistance federal award

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-583-0011 - Local FEMA PA Match	\$-58,336.42	\$0.00	\$-58,336.42	\$0.00
Total		\$-58,336.42	\$0.00	\$-58,336.42	\$0.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-583-0011 - Local FEMA PA Match	12/17/2020 12/17/2020	\$58,336.42	Items Not Listed Above	Pass through match
Total:					\$58,336.42

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes				
74	Non-Compliance Explanation							
	75 A		75 B		75 C	75 D	75 E	
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	IA-583-0011 - Local FEMA PA Match		07/13/2021	07/13/2021	\$-58,336.42	Items Not Listed Above	Pass through match	
Total:					\$-58,336.42			

Sub Screen: Award: 309-PFAV-0052-2129317

54	Sub-Recipient Organization (Awardee)*	UNIVERSITY OF IOWA-2129317UN	
55	Award Number*	309-PFAV-0052-2129317	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$131,953.00
58	Award Date *	11/23/2020	
59	Period of Performance Start Date *	11/24/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	105 Jessup Hall	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Iowa City	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52242-1316	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *		
70	Award Description *	Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$00	\$131,953.00	\$00	\$131,953.00
Total		\$00	\$131,953.00	\$00	\$131,953.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	11/24/2020	11/24/2020	\$132,104.00	Items Not Listed Above	Vocational Training
Line 2	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	04/01/2021	06/30/2021	\$-151.00	Items Not Listed Above	Vocational Training
Total:						\$131,953.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 5832129317202012311

54	Sub-Recipient Organization (Awardee)*	UNIVERSITY OF IOWA-2129317UN
55	Award Number*	5832129317202012311
56	Award Payment Method*	Reimbursable
57	Amount of Award *	\$6,021,684.78
58	Award Date *	03/13/2020
59	Period of Performance Start Date *	03/14/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	105 Jessup Hall
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Iowa City
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52242-1316
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	COVID expenses as match to FEMA Public Assistance federal award

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-583-0012 - State FEMA PA Match	\$00	\$6,021,684.78	\$00	\$6,021,684.78
Total		\$00	\$6,021,684.78	\$00	\$6,021,684.78

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-583-0012 - State FEMA PA Match	12/29/2020 12/29/2020	\$2,631,038.55	Items Not Listed Above	Pass through match
Line 2	IA-583-0012 - State FEMA PA Match	12/29/2020 12/29/2020	\$3,390,646.23	Items Not Listed Above	Pass through match
Total:					\$6,021,684.78

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFIF-0052-2129752

54	Sub-Recipient Organization (Awardee)*	MARSHALL CO ATTORNEY-2129752MA	
55	Award Number*	309-PFIF-0052-2129752	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *	\$100,000.00	
58	Award Date *	09/29/2020	
59	Period of Performance Start Date *	10/19/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	1 E Main St	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Marshalltown	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50158-4915	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	1	
70	Award Description *	<p>The programs funded will provide Iowans the opportunity to earn for-credit and non- credit postsecondary credentials leading to high-demand jobs. Applicants include employers, community leaders and others who will collaborate to address local workforce needs.</p>	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	\$00	\$100,000.00	\$00	\$100,000.00
Total		\$00	\$100,000.00	\$00	\$100,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAIF - Future Ready Iowa Employer Innovation	10/19/2020 10/19/2020	\$100,000.00	Items Not Listed Above	Vocational Training
Total:					\$100,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
Total:						\$00

Sub Screen: Award: 309-PFEH-0052-2130583

54	Sub-Recipient Organization (Awardee)*	City of State Center-2130583ST
55	Award Number*	309-PFEH-0052-2130583
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$96,250.00
58	Award Date *	11/19/2020
59	Period of Performance Start Date *	11/20/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	118 Main St E
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	State Center
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50247-7765
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	Funding is supporting the creation and expansion of short-term learn and learn training programs resulting in industry-recognized credentials by providing grants for Expand opportunities for Iowans whose employment has been affected or eliminated because of the Coronavirus pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAEH - Earn and Learn Grants	\$00	\$96,250.00	\$00	\$96,250.00
Total		\$00	\$96,250.00	\$00	\$96,250.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAEH - Earn and Learn Grants	11/20/2020 11/20/2020	\$96,250.00	Items Not Listed Above	Vocational Training
Total:					\$96,250.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0049-010F-2130993BR

54	Sub-Recipient Organization (Awardee)*	BROADLAWNS MEDICAL CTR-2130993BR
55	Award Number*	269-0049-010F-2130993BR
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$399,285.02
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	1801 Hickman Rd
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Des Moines
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50314-1548
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$399,285.02	\$00	\$399,285.02
Total		\$00	\$399,285.02	\$00	\$399,285.02

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$399,285.02	Public Health Expenses	
Total:					\$399,285.02

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFAV-0052-2130993

54	Sub-Recipient Organization (Awardee)*	BROADLAWNS MEDICAL CTR-2130993BR	
55	Award Number*	309-PFAV-0052-2130993	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$171,680.56
58	Award Date *	11/15/2020	
59	Period of Performance Start Date *	11/16/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	1801 Hickman Rd	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Des Moines	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50314-1548	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	3	
70	Award Description *	Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$00	\$171,680.56	\$00	\$171,680.56
Total		\$00	\$171,680.56	\$00	\$171,680.56

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	11/16/2020	11/16/2020	\$171,680.56	Items Not Listed Above	Vocational Training
Total:						\$171,680.56

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 269-0049-010F-2131017SP

54	Sub-Recipient Organization (Awardee)*	SPENCER MUNICIPAL HOSPITAL-2131017SP	
55	Award Number*	269-0049-010F-2131017SP	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$140,800.95
58	Award Date *	11/22/2020	
59	Period of Performance Start Date *	11/24/2020	
60	Period of Performance End Date *	11/24/2020	
61	Primary Place of Performance Address Line 1 *	1200 1st Ave E	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Spencer	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	51301-4342	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	4	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$140,800.95	\$00	\$140,800.95
Total		\$00	\$140,800.95	\$00	\$140,800.95

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020	11/24/2020	\$140,800.95	Public Health Expenses	
Total:						\$140,800.95

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 269-0049-010F-2131048SP

54	Sub-Recipient Organization (Awardee)*	IOWA SPECIALTY HOSPITAL-2131048SP
55	Award Number*	269-0049-010F-2131048SP
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$62,066.33
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	1316 S Main St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Clarion
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50525-2019
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$62,066.33	\$00	\$62,066.33
Total		\$00	\$62,066.33	\$00	\$62,066.33

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$62,066.33	Public Health Expenses	
Total:					\$62,066.33

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0047-010D-2131106WA

54	Sub-Recipient Organization (Awardee)*	WAYNE COUNTY FAIR ASSOC-2131106WA	
55	Award Number*	269-0047-010D-2131106WA	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$50,000.00
58	Award Date *	11/29/2020	
59	Period of Performance Start Date *	12/01/2020	
60	Period of Performance End Date *	12/01/2020	
61	Primary Place of Performance Address Line 1 *	PO BOX 167	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Corydon	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50060-0167	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	2	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020	12/01/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:						\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 309-PFAV-0052-2131291

54	Sub-Recipient Organization (Awardee)*	ST VINCENT DEPAUL SOCIETY-2131291ST	
55	Award Number*	309-PFAV-0052-2131291	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$157,249.87
58	Award Date *	11/18/2020	
59	Period of Performance Start Date *	11/19/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	1426 6th Ave	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Des Moines	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50314-2801	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	3	
70	Award Description *	Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$00	\$157,249.87	\$00	\$157,249.87
Total		\$00	\$157,249.87	\$00	\$157,249.87

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	11/19/2020	11/24/2020	\$160,616.00	Items Not Listed Above	Vocational Training
Line 2	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	04/01/2021	06/30/2021	\$-3,366.13	Items Not Listed Above	Vocational Training
Total:						\$157,249.87

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 309-PFAV-0052-2131379

54	Sub-Recipient Organization (Awardee)*	NORTH SCOTT CSD-2131379NO	
55	Award Number*	309-PFAV-0052-2131379	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$50,000.00
58	Award Date *	11/19/2020	
59	Period of Performance Start Date *	11/20/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	251 E Iowa St	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Eldridge	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52748-1917	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	2	
70	Award Description *	Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	11/20/2020	11/20/2020	\$50,000.00	Items Not Listed Above	Vocational Training
Total:						\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 269-0049-010F-2131643LA

54	Sub-Recipient Organization (Awardee)*	LAKES REGIONAL HLTH CARE-2131643LA
55	Award Number*	269-0049-010F-2131643LA
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$71,615.00
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	PO BOX Ab
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Spirit Lake
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51360-0159
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$71,615.00	\$00	\$71,615.00
Total		\$00	\$71,615.00	\$00	\$71,615.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$71,615.00	Public Health Expenses	
Total:					\$71,615.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0049-010F-2131658GR

54	Sub-Recipient Organization (Awardee)*	GREATER REGIONAL MEDICAL CENTER-2131658GR	
55	Award Number*	269-0049-010F-2131658GR	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$55,449.27
58	Award Date *	11/22/2020	
59	Period of Performance Start Date *	11/24/2020	
60	Period of Performance End Date *	11/24/2020	
61	Primary Place of Performance Address Line 1 *	1700 W Townline St	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Creston	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50801-1054	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	3	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$55,449.27	\$00	\$55,449.27
Total		\$00	\$55,449.27	\$00	\$55,449.27

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020	11/24/2020	\$55,449.27	Public Health Expenses	
Total:						\$55,449.27

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 269-0049-010F-2131672HA

54	Sub-Recipient Organization (Awardee)*	HANCOCK COUNTY HEALTH SYSTEM-2131672HA	
55	Award Number*	269-0049-010F-2131672HA	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$51,177.50
58	Award Date *	11/22/2020	
59	Period of Performance Start Date *	11/24/2020	
60	Period of Performance End Date *	11/24/2020	
61	Primary Place of Performance Address Line 1 *	532 1st St NW	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Britt	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50423-1227	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	4	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$51,177.50	\$00	\$51,177.50
Total		\$00	\$51,177.50	\$00	\$51,177.50

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020	11/24/2020	\$51,177.50	Public Health Expenses	
Total:						\$51,177.50

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 269-0049-010F-2131674DE

54	Sub-Recipient Organization (Awardee)*	DELAWARE COUNTY MEMORIAL HOSPITAL-2131674DE
55	Award Number*	269-0049-010F-2131674DE
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$60,223.61
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 359
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Manchester
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52057-0359
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$60,223.61	\$00	\$60,223.61
Total		\$00	\$60,223.61	\$00	\$60,223.61

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$60,223.61	Public Health Expenses	
Total:					\$60,223.61

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0049-010F-2131838MA

54	Sub-Recipient Organization (Awardee)*	MAHASKA COUNTY HOSPITAL-2131838MA	
55	Award Number*	269-0049-010F-2131838MA	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$81,331.18
58	Award Date *	11/22/2020	
59	Period of Performance Start Date *	11/24/2020	
60	Period of Performance End Date *	11/24/2020	
61	Primary Place of Performance Address Line 1 *	1229 C Ave E	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Oskaloosa	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52577-4246	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	2	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$81,331.18	\$00	\$81,331.18
Total		\$00	\$81,331.18	\$00	\$81,331.18

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020	11/24/2020	\$81,331.18	Public Health Expenses	
Total:						\$81,331.18

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 269-0049-010F-2131843WA

54	Sub-Recipient Organization (Awardee)*	WAYNE COUNTY HOSPITAL-2131843WA
55	Award Number*	269-0049-010F-2131843WA
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$50,591.18
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 305
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Corydon
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50060-0305
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$50,591.18	\$00	\$50,591.18
Total		\$00	\$50,591.18	\$00	\$50,591.18

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$50,591.18	Public Health Expenses	
Total:					\$50,591.18

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description Delete
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 269-0049-010F-2131877HA

54	Sub-Recipient Organization (Awardee)*	HAMILTON COUNTY HOSPITAL-2131877HA
55	Award Number*	269-0049-010F-2131877HA
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$60,307.37
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 430
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Webster City
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50595-0430
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$60,307.37	\$00	\$60,307.37
Total		\$00	\$60,307.37	\$00	\$60,307.37

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$60,307.37	Public Health Expenses	
Total:					\$60,307.37

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0049-010F-2131887OR

54	Sub-Recipient Organization (Awardee)*	ORANGE CITY MUNICIPAL HO-2131887OR
55	Award Number*	269-0049-010F-2131887OR
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$58,548.40
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	1000 Lincoln Cir SE
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Orange City
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51041-1836
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$58,548.40	\$00	\$58,548.40
Total		\$00	\$58,548.40	\$00	\$58,548.40

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$58,548.40	Public Health Expenses	
Total:					\$58,548.40

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0047-010D-2132085CO

54	Sub-Recipient Organization (Awardee)*	IOWA COUNTY FAIR-2132085CO
55	Award Number*	269-0047-010D-2132085CO
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$50,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	800 E Marion St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	MARENGO
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52301
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0047-010D-2132128DI

54	Sub-Recipient Organization (Awardee)*	DICKINSON CO AG SOCIETY-2132128DI
55	Award Number*	269-0047-010D-2132128DI
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$50,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	1602 15th St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Spirit Lake
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51360-2106
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0047-010D-2132216DA

54	Sub-Recipient Organization (Awardee)*	DALLAS CO FAIR ASSOC-2132216DA
55	Award Number*	269-0047-010D-2132216DA
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$50,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	28057 Fairground Rd # 71
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Adel
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50003-4406
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 269-0047-010D-2132226MO

54	Sub-Recipient Organization (Awardee)*	MONROE CO FAIRGROUNDS-2132226MO
55	Award Number*	269-0047-010D-2132226MO
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$50,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	6738 147th St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Albia
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52531-8887
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0043-009Q-2132301BO

54	Sub-Recipient Organization (Awardee)*	BOYS & GIRLS CLUBS OF THE CEDAR VALLEY-2132301BO
55	Award Number*	269-0043-009Q-2132301BO
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$100,000.00
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	12/03/2020
60	Period of Performance End Date *	12/03/2020
61	Primary Place of Performance Address Line 1 *	515 Lime St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Waterloo
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50703-3804
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	To support organizations providing volunteer infrastructure including Volunteer Center, Mentoring, and RSVP programs, as well as community-based organizations with established trust and history of serving communities of color.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0379 - Small Business Relief Grants	\$00	\$100,000.00	\$00	\$100,000.00
Total		\$00	\$100,000.00	\$00	\$100,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0379 - Small Business Relief Grants	12/03/2020 12/03/2020	\$100,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$100,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 269-0049-010F-2134780AL

54	Sub-Recipient Organization (Awardee)*	ALEGENT HEALTH BERGAN MERCY HEALTH SYSTEM-2134780AL
55	Award Number*	269-0049-010F-2134780AL
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$387,474.83
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	800 Mercy Dr
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Council Bluffs
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51503-3128
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$387,474.83	\$00	\$387,474.83
Total		\$00	\$387,474.83	\$00	\$387,474.83

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$387,474.83	Public Health Expenses	
Total:					\$387,474.83

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: ACFS-16-192

54	Sub-Recipient Organization (Awardee)*	FOOD BANK FOR THE HEARTLAND INC-2135170FO	
55	Award Number*	ACFS-16-192	
56	Award Payment Method*	Reimbursable	
57	Amount of Award *		\$114,200.00
58	Award Date *	05/18/2020	
59	Period of Performance Start Date *	05/19/2020	
60	Period of Performance End Date *	12/31/2020	
61	Primary Place of Performance Address Line 1 *	10525 J St	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Omaha	
65	Primary Place of Performance State Code *	NE	
66	Primary Place of Performance Zip+4 *	68127-1021	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	2	
70	Award Description *	Reimbursement for costs associated with the acquisition of food and supplies in response to the coronavirus pandemic emergency. Food products unable to be secured through TEFAP, PPE, items needed for packaging and/or delivery of food products. No employee salary or benefit costs	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-FII2020 - Feeding Iowans Initiative	\$00	\$114,200.00	\$00	\$114,200.00
Total		\$00	\$114,200.00	\$00	\$114,200.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-FII2020 - Feeding Iowans Initiative	12/17/2020	12/17/2020	\$114,200.00	Food Programs	
Total:						\$114,200.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 269-0045-009X-2144009GR

54	Sub-Recipient Organization (Awardee)*	GREEN PLAINS RENEWABLE-2144009GR
55	Award Number*	269-0045-009X-2144009GR
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$600,204.00
58	Award Date *	10/04/2020
59	Period of Performance Start Date *	10/23/2020
60	Period of Performance End Date *	10/23/2020
61	Primary Place of Performance Address Line 1 *	1811 Aksarben Dr
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Omaha
65	Primary Place of Performance State Code *	NE
66	Primary Place of Performance Zip+4 *	68106-2279
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0045 - State Biofuel Grant Program	\$00	\$600,204.00	\$00	\$600,204.00
Total		\$00	\$600,204.00	\$00	\$600,204.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0045 - State Biofuel Grant Program	10/23/2020 10/23/2020	\$600,204.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$600,204.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 269-0049-010F-3003979CA

54	Sub-Recipient Organization (Awardee)*	CATHOLIC HEALTH INITIATIVES IOWA CORPORATION-3003979CA
55	Award Number*	269-0049-010F-3003979CA
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$136,119.00
58	Award Date *	11/20/2020
59	Period of Performance Start Date *	11/20/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	1111 6th Ave
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Des Moines
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50314-2610
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$00	\$136,119.00	\$00	\$136,119.00
Total		\$00	\$136,119.00	\$00	\$136,119.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	11/20/2020 11/20/2020	\$136,119.00	Items Not Listed Above	Vocational Training
Total:					\$136,119.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 309-PFAV-0052-3003979

54	Sub-Recipient Organization (Awardee)*	CATHOLIC HEALTH INITIATIVES IOWA CORPORATION-3003979CA	
55	Award Number*	309-PFAV-0052-3003979	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$125,411.88
58	Award Date *	11/19/2020	
59	Period of Performance Start Date *	11/20/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	1111 6th Ave	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Des Moines	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50314-2610	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	3	
70	Award Description *	Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$00	\$125,411.88	\$00	\$125,411.88
Total		\$00	\$125,411.88	\$00	\$125,411.88

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	11/20/2020	11/20/2020	\$136,119.00	Items Not Listed Above	Vocational Training
Line 2	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	04/01/2021	06/30/2021	\$-10,707.12	Items Not Listed Above	Vocational Training
Total:						\$125,411.88

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 269-0047-010D-3004868AD

54	Sub-Recipient Organization (Awardee)*	ADAMS COUNTY-3004868AD
55	Award Number*	269-0047-010D-3004868AD
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$50,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	603 7th St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Corning
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50841-1513
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0047-010D-3007408DE

54	Sub-Recipient Organization (Awardee)*	DELAWARE COUNTY FAIR-3007408DE
55	Award Number*	269-0047-010D-3007408DE
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$75,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 243
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Manchester
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52057-0243
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$75,000.00	\$00	\$75,000.00
Total		\$00	\$75,000.00	\$00	\$75,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$75,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$75,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0043-009Q-3007933WI

54	Sub-Recipient Organization (Awardee)*	Willis Dady Emergency Shelter-3007933WI
55	Award Number*	269-0043-009Q-3007933WI
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$64,500.00
58	Award Date *	10/07/2020
59	Period of Performance Start Date *	11/02/2020
60	Period of Performance End Date *	11/02/2020
61	Primary Place of Performance Address Line 1 *	1247 4th Ave SE
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Cedar Rapids
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52403-4020
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and supports, and/or to reopen the nonprofit following the COVID-19 pandemic. This grant was targeted to shelters.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0379 - Small Business Relief Grants	\$00	\$64,500.00	\$00	\$64,500.00
Total		\$00	\$64,500.00	\$00	\$64,500.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0379 - Small Business Relief Grants	11/02/2020 11/02/2020	\$64,500.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$64,500.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 309-PFEH-0052-3007933

54	Sub-Recipient Organization (Awardee)*	Willis Dady Emergency Shelter-3007933W1
55	Award Number*	309-PFEH-0052-3007933
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$118,175.92
58	Award Date *	11/01/2020
59	Period of Performance Start Date *	11/02/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	1247 4th Ave SE
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Cedar Rapids
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52403-4020
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	Funding is supporting the creation and expansion of short-term learn and learn training programs resulting in industry-recognized credentials by providing grants for Expand opportunities for Iowans whose employment has been affected or eliminated because of the Coronavirus pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAEH - Earn and Learn Grants	\$00	\$118,175.92	\$00	\$118,175.92
Total		\$00	\$118,175.92	\$00	\$118,175.92

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAEH - Earn and Learn Grants	11/19/2020 11/19/2020	\$126,500.00	Items Not Listed Above	Vocational Training
Line 2	IA-309-AAEH - Earn and Learn Grants	04/01/2021 06/30/2021	\$-8,324.08	Items Not Listed Above	Vocational Training
Total:					\$118,175.92

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 21-RFRRP-010-018/249

54	Sub-Recipient Organization (Awardee)*	DANLEE CORPORATION-3009282DA
55	Award Number*	21-RFRRP-010-018/249
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$300,000.00
58	Award Date *	10/07/2020
59	Period of Performance Start Date *	10/22/2020
60	Period of Performance End Date *	12/30/2020
61	Primary Place of Performance Address Line 1 *	101 S Jefferson Way
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Indianola
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50125-2619
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	For the construction, installation, upgrade, and retrofit of equipment associated with the sale of renewable fuels to expand markets disrupted by COVID-19.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	\$00	\$300,000.00	\$00	\$300,000.00
Total		\$00	\$300,000.00	\$00	\$300,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	10/22/2020 12/08/2020	\$300,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$300,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A		75 B	75 C	75 D	75 E
	Project*		Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description>Delete
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 269-0047-010D-3009844SA

54	Sub-Recipient Organization (Awardee)*	SAC COUNTY FAIR-3009844SA
55	Award Number*	269-0047-010D-3009844SA
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$50,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 423
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Sac City
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50583-0423
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0047-010D-3010455CA

54	Sub-Recipient Organization (Awardee)*	CALHOUN COUNTY EXPO-3010455CA
55	Award Number*	269-0047-010D-3010455CA
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$50,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 253
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Rockwell City
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50579-0253
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 269-0047-010D-3010856CL

54	Sub-Recipient Organization (Awardee)*	CLAY COUNTY FAIR ASSOC-3010856CL
55	Award Number*	269-0047-010D-3010856CL
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$100,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/04/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 527
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Spencer
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51301-0527
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$100,000.00	\$00	\$100,000.00
Total		\$00	\$100,000.00	\$00	\$100,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/04/2020	\$100,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$100,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0049-010F-3012538ME

54	Sub-Recipient Organization (Awardee)*	MERCY HEALTH SERVICES-IOWA CORP-3012538ME
55	Award Number*	269-0049-010F-3012538ME
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$877,555.94
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	1000 4th St SW
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Mason City
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50401-2800
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$877,555.94	\$00	\$877,555.94
Total		\$00	\$877,555.94	\$00	\$877,555.94

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$877,555.94	Public Health Expenses	
Total:					\$877,555.94

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 309-PFEH-0052-3013226

54	Sub-Recipient Organization (Awardee)*	Pro Tow LLC-3013226PR
55	Award Number*	309-PFEH-0052-3013226
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$117,018.00
58	Award Date *	12/10/2020
59	Period of Performance Start Date *	12/11/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	1501 76th Ave SW
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Cedar Rapids
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52404-7057
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	Funding is supporting the creation and expansion of short-term learn and learn training programs resulting in industry-recognized credentials by providing grants for Expand opportunities for Iowans whose employment has been affected or eliminated because of the Coronavirus pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAEH - Earn and Learn Grants	\$00	\$117,018.00	\$00	\$117,018.00
Total		\$00	\$117,018.00	\$00	\$117,018.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAEH - Earn and Learn Grants	12/11/2020 12/11/2020	\$117,018.00	Items Not Listed Above	Vocational Training
Total:					\$117,018.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0047-010D-3016248CH

54	Sub-Recipient Organization (Awardee)*	CHEROKEE COUNTY FAIR ASS-3016248CH
55	Award Number*	269-0047-010D-3016248CH
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$50,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 53
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Cherokee
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51012-0053
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 309-PFAV-0052-3017072

54	Sub-Recipient Organization (Awardee)*	HS Medical Billing Services-3017072HS	
55	Award Number*	309-PFAV-0052-3017072	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$50,000.00
58	Award Date *	11/23/2020	
59	Period of Performance Start Date *	11/24/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	500 E Court Ave Ste 305	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Des Moines	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50309-2057	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *		
70	Award Description *	Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	11/24/2020	11/24/2020	\$50,000.00	Items Not Listed Above	Vocational Training
Total:						\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 269-0043-009Q-3019182SH

54	Sub-Recipient Organization (Awardee)*	SHELTER HOUSE COMM SHELTER-3019182SH
55	Award Number*	269-0043-009Q-3019182SH
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$67,500.00
58	Award Date *	10/05/2020
59	Period of Performance Start Date *	11/02/2020
60	Period of Performance End Date *	11/02/2020
61	Primary Place of Performance Address Line 1 *	429 Southgate Ave
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Iowa City
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52240-4401
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and supports, and/or to reopen the nonprofit following the COVID-19 pandemic. This grant was targeted to shelters.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0379 - Small Business Relief Grants	\$00	\$67,500.00	\$00	\$67,500.00
Total		\$00	\$67,500.00	\$00	\$67,500.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0379 - Small Business Relief Grants	11/02/2020 11/02/2020	\$67,500.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$67,500.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A		75 B	75 C	75 D	75 E
	Project*		Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description>Delete
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 269-0047-010D-3021002HA

54	Sub-Recipient Organization (Awardee)*	HAMILTON COUNTY EXPOSITI-3021002HA
55	Award Number*	269-0047-010D-3021002HA
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$75,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 563
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Webster City
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50595-0563
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$75,000.00	\$00	\$75,000.00
Total		\$00	\$75,000.00	\$00	\$75,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$75,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$75,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 269-0049-010F-3021154CE

54	Sub-Recipient Organization (Awardee)*	CENTRAL IOWA HOSPITAL CO-3021154CE
55	Award Number*	269-0049-010F-3021154CE
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$340,234.06
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	1660 60th St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	West Des Moines
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50266-7700
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$340,234.06	\$00	\$340,234.06
Total		\$00	\$340,234.06	\$00	\$340,234.06

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$340,234.06	Public Health Expenses	
Total:					\$340,234.06

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0047-010D-3025259WA

54	Sub-Recipient Organization (Awardee)*	WASHINGTON COUNTY FAIR-3025259WA	
55	Award Number*	269-0047-010D-3025259WA	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$75,000.00
58	Award Date *	11/29/2020	
59	Period of Performance Start Date *	12/01/2020	
60	Period of Performance End Date *	12/01/2020	
61	Primary Place of Performance Address Line 1 *	PO BOX 485	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Washington	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52353-0485	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	2	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$75,000.00	\$00	\$75,000.00
Total		\$00	\$75,000.00	\$00	\$75,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020	12/01/2020	\$75,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:						\$75,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 269-0047-010D-3025282JA

54	Sub-Recipient Organization (Awardee)*	JASPER COUNTY AGRICULTUR-3025282JA
55	Award Number*	269-0047-010D-3025282JA
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$50,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	359 N WALNUT ST
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	COLFAX
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50054
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0047-010D-3031875FA

54	Sub-Recipient Organization (Awardee)*	FAIR AND EXPOSITION SOCIETY OF JONES COUNTY-3031875FA	
55	Award Number*	269-0047-010D-3031875FA	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$100,000.00
58	Award Date *	11/29/2020	
59	Period of Performance Start Date *	12/01/2020	
60	Period of Performance End Date *	12/04/2020	
61	Primary Place of Performance Address Line 1 *	PO BOX 150	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Monticello	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52310-0150	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	1	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$100,000.00	\$00	\$100,000.00
Total		\$00	\$100,000.00	\$00	\$100,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020	12/04/2020	\$100,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:						\$100,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 21-RFRRP-246-247/251-252

54	Sub-Recipient Organization (Awardee)*	ZUB'S SHOP INC-3039009ZU
55	Award Number*	21-RFRRP-246-247/251-252
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$120,000.00
58	Award Date *	12/02/2020
59	Period of Performance Start Date *	12/08/2020
60	Period of Performance End Date *	12/30/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 431
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Sutherland
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51058-0431
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	For the construction, installation, upgrade, and retrofit of equipment associated with the sale of renewable fuels to expand markets disrupted by COVID-19.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	\$00	\$120,000.00	\$00	\$120,000.00
Total		\$00	\$120,000.00	\$00	\$120,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	12/08/2020 12/21/2020	\$120,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$120,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A		75 B	75 C	75 D	75 E
	Project*		Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description>Delete
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 269-0049-010F-3041506RC

54	Sub-Recipient Organization (Awardee)*	RCHP OTTUMWA LLC-3041506RC
55	Award Number*	269-0049-010F-3041506RC
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$200,354.47
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	1001 Pennsylvania Ave
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Ottumwa
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52501-6427
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$200,354.47	\$00	\$200,354.47
Total		\$00	\$200,354.47	\$00	\$200,354.47

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$200,354.47	Public Health Expenses	
Total:					\$200,354.47

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0049-010F-3044651SA

54	Sub-Recipient Organization (Awardee)*	SANFORD HEALTH NETWORK-3044651SA
55	Award Number*	269-0049-010F-3044651SA
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$64,160.34
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	118 N 7th Ave
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Sheldon
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51201-1235
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$64,160.34	\$00	\$64,160.34
Total		\$00	\$64,160.34	\$00	\$64,160.34

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$64,160.34	Public Health Expenses	
Total:					\$64,160.34

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0047-010D-3044909FL

54	Sub-Recipient Organization (Awardee)*	FLOYD COUNTY FAIR SOCIETY-3044909FL
55	Award Number*	269-0047-010D-3044909FL
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$75,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 301
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Charles City
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50616-0301
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$75,000.00	\$00	\$75,000.00
Total		\$00	\$75,000.00	\$00	\$75,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$75,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$75,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFEH-0052-3046015

54	Sub-Recipient Organization (Awardee)*	Marshall County Comms Commission-3046015MA	
55	Award Number*	309-PFEH-0052-3046015	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *	\$129,800.00	
58	Award Date *	11/18/2020	
59	Period of Performance Start Date *	11/19/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	1 E Main St	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Marshalltown	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50158-4915	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	1	
70	Award Description *	Funding is supporting the creation and expansion of short-term learn and learn training programs resulting in industry-recognized credentials by providing grants for Expand opportunities for Iowans whose employment has been affected or eliminated because of the Coronavirus pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAEH - Earn and Learn Grants	\$00	\$129,800.00	\$00	\$129,800.00
Total		\$00	\$129,800.00	\$00	\$129,800.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAEH - Earn and Learn Grants	11/19/2020 11/19/2020	\$129,800.00	Items Not Listed Above	Vocational Training
Total:					\$129,800.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
Total:						\$00

Sub Screen: Award: 269-0047-010D-3046206BE

54	Sub-Recipient Organization (Awardee)*	BENTON COUNTY AGRICULTURAL SOCIETY-3046206BE
55	Award Number*	269-0047-010D-3046206BE
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$50,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	106 N 8th Ave
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Vinton
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52349-2111
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 269-0047-010D-3058285WE

54	Sub-Recipient Organization (Awardee)*	WEBSTER COUNTY AGRICULTURE ASSOCIATION-3058285WE
55	Award Number*	269-0047-010D-3058285WE
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$50,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	2171 290th St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Fort Dodge
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50501-8521
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 269-0047-010D-3059358PO

54	Sub-Recipient Organization (Awardee)*	POTTAWATTAMIE COUNTY FAIR-3059358PO
55	Award Number*	269-0047-010D-3059358PO
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$50,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 187
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Oakland
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51560-0187
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0047-010D-3060979CR

54	Sub-Recipient Organization (Awardee)*	CRAWFORD COUNTY FAIR ASSOCIATION-3060979CR
55	Award Number*	269-0047-010D-3060979CR
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$50,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 188
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Denison
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51442-0188
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 269-0043-009Q-3061175UN

54	Sub-Recipient Organization (Awardee)*	UNITED WAYS OF IOWA-3061175UN
55	Award Number*	269-0043-009Q-3061175UN
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$10,000.00
58	Award Date *	12/09/2020
59	Period of Performance Start Date *	12/09/2020
60	Period of Performance End Date *	12/23/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 316
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Johnston
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50131-0316
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and supports, and/or to reopen the nonprofit following the COVID-19 pandemic. This grant was targeted to AmeriCorp programs.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0379 - Small Business Relief Grants	\$00	\$10,000.00	\$00	\$10,000.00
Total		\$00	\$10,000.00	\$00	\$10,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0379 - Small Business Relief Grants	12/09/2020 12/23/2020	\$10,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$10,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A		75 B	75 C	75 D	75 E
	Project*		Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 269-0049-010F-3063090AL

54	Sub-Recipient Organization (Awardee)*	ALLEN MEMORIAL HOSPITAL CORPORATION-3063090AL	
55	Award Number*	269-0049-010F-3063090AL	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$719,835.43
58	Award Date *	11/22/2020	
59	Period of Performance Start Date *	11/24/2020	
60	Period of Performance End Date *	11/24/2020	
61	Primary Place of Performance Address Line 1 *	1825 Logan Ave	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Waterloo	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50703-1916	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	1	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$719,835.43	\$00	\$719,835.43
Total		\$00	\$719,835.43	\$00	\$719,835.43

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020	11/24/2020	\$719,835.43	Public Health Expenses	
Total:						\$719,835.43

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 309-PFEH-0052-3065177

54	Sub-Recipient Organization (Awardee)*	WILRONA LLC-3065177WI
55	Award Number*	309-PFEH-0052-3065177
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$165,187.00
58	Award Date *	11/18/2020
59	Period of Performance Start Date *	11/19/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	1755 P Ave
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Marengo
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52301-8567
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	Funding is supporting the creation and expansion of short-term learn and learn training programs resulting in industry-recognized credentials by providing grants for Expand opportunities for Iowans whose employment has been affected or eliminated because of the Coronavirus pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAEH - Earn and Learn Grants	\$00	\$165,187.00	\$00	\$165,187.00
Total		\$00	\$165,187.00	\$00	\$165,187.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAEH - Earn and Learn Grants	11/19/2020 11/19/2020	\$165,187.00	Items Not Listed Above	Vocational Training
Total:					\$165,187.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0049-010F-3067626ST

54	Sub-Recipient Organization (Awardee)*	ST LUKES METHODIST HOSPITAL-3067626ST	
55	Award Number*	269-0049-010F-3067626ST	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$1,125,318.71
58	Award Date *	11/22/2020	
59	Period of Performance Start Date *	11/24/2020	
60	Period of Performance End Date *	11/24/2020	
61	Primary Place of Performance Address Line 1 *	1026 A Ave NE	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Cedar Rapids	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52402-5036	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	1	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$1,125,318.71	\$00	\$1,125,318.71
Total		\$00	\$1,125,318.71	\$00	\$1,125,318.71

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020	11/24/2020	\$1,125,318.71	Public Health Expenses	
Total:						\$1,125,318.71

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 309-PFEH-002-3068035

54	Sub-Recipient Organization (Awardee)*	MIKE MCMURRIN TRUCKING INC-3068035MI	
55	Award Number*	309-PFEH-002-3068035	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$54,834.64
58	Award Date *	11/19/2020	
59	Period of Performance Start Date *	11/20/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	2665 Old River Rd SW	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Cedar Rapids	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52404-7450	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	1	
70	Award Description *	Funding is supporting the creation and expansion of short-term learn and learn training programs resulting in industry-recognized credentials by providing grants for Expand opportunities for Iowans whose employment has been affected or eliminated because of the Coronavirus pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAEH - Earn and Learn Grants	\$00	\$54,834.64	\$00	\$54,834.64
Total		\$00	\$54,834.64	\$00	\$54,834.64

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Category Description
Line 1	IA-309-AAEH - Earn and Learn Grants	11/20/2020	11/20/2020	\$60,854.00	Vocational Training
Line 2	IA-309-AAEH - Earn and Learn Grants	04/01/2021	06/30/2021	\$-6,019.36	Vocational Training
Total:					\$54,834.64

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes				
74	Non-Compliance Explanation						
	75 A	75 B	75 C	75 D	75 E		
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:							\$00

Sub Screen: Award: 21-RFRRP-218-223

54	Sub-Recipient Organization (Awardee)*	PRO COOPERATIVE-3071295PR
55	Award Number*	21-RFRRP-218-223
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$172,892.00
58	Award Date *	10/28/2020
59	Period of Performance Start Date *	12/15/2020
60	Period of Performance End Date *	12/30/2020
61	Primary Place of Performance Address Line 1 *	17 3rd Ave NE
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Pocahontas
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50574-1614
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	For the construction, installation, upgrade, and retrofit of equipment associated with the sale of renewable fuels to expand markets disrupted by COVID-19.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	\$00	\$172,892.00	\$00	\$172,892.00
Total		\$00	\$172,892.00	\$00	\$172,892.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	12/15/2020 12/15/2020	\$172,892.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$172,892.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A		75 B	75 C	75 D	75 E	
	Project*		Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 269-0047-010D-3073056DU

54	Sub-Recipient Organization (Awardee)*	DUBUQUE COUNTY FAIR ASSOCIATION INC-3073056DU
55	Award Number*	269-0047-010D-3073056DU
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$100,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/04/2020
61	Primary Place of Performance Address Line 1 *	14569 Old Highway Rd
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Dubuque
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52002-9602
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$100,000.00	\$00	\$100,000.00
Total		\$00	\$100,000.00	\$00	\$100,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/04/2020	\$100,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$100,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 269-0049-010F-3075485ME

54	Sub-Recipient Organization (Awardee)*	MERCY HEALTH SERVICES-IOWA CORP-3075485ME
55	Award Number*	269-0049-010F-3075485ME
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$830,482.69
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 203
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Sioux City
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51102-0203
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$830,482.69	\$00	\$830,482.69
Total		\$00	\$830,482.69	\$00	\$830,482.69

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$830,482.69	Public Health Expenses	
Total:					\$830,482.69

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 21-RFRRP-144-146

54	Sub-Recipient Organization (Awardee)*	RENEWABLE ENERGY GROUP INC-3076090RE
55	Award Number*	21-RFRRP-144-146
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$0.00
58	Award Date *	11/02/2020
59	Period of Performance Start Date *	11/16/2020
60	Period of Performance End Date *	09/30/2021
61	Primary Place of Performance Address Line 1 *	416 S Bell Ave
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Ames
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50010-7711
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	For the construction, installation, upgrade, and retrofit of equipment associated with the sale of renewable fuels to expand markets disrupted by COVID-19.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	\$-90,000.00	\$0.00	\$-90,000.00	\$0.00
Total		\$-90,000.00	\$0.00	\$-90,000.00	\$0.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	11/16/2020 11/16/2020	\$90,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$90,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category DescriptionDelete
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	07/01/2021	09/30/2021	\$-90,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:				\$-90,000.00		

Sub Screen: Award: 309-PFEH-0052-3078917DE

54	Sub-Recipient Organization (Awardee)*	DEJEAR INCORPORATED-3078917DE
55	Award Number*	309-PFEH-0052-3078917DE
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$199,364.27
58	Award Date *	11/18/2020
59	Period of Performance Start Date *	11/19/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	2800 Shadow Creek Ln
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Des Moines
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50320-2813
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	Funding is supporting the creation and expansion of short-term learn and learn training programs resulting in industry-recognized credentials by providing grants for Expand opportunities for Iowans whose employment has been affected or eliminated because of the Coronavirus pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAEH - Earn and Learn Grants	\$00	\$199,364.27	\$00	\$199,364.27
Total		\$00	\$199,364.27	\$00	\$199,364.27

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAEH - Earn and Learn Grants	11/19/2020 11/19/2020	\$204,050.00	Items Not Listed Above	Vocational Training
Line 2	IA-309-AAEH - Earn and Learn Grants	04/01/2021 06/30/2021	\$-4,685.73	Items Not Listed Above	Vocational Training
Total:					\$199,364.27

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFEH-0052-3078917ET

54	Sub-Recipient Organization (Awardee)*	ETHNIC MINORITIES OF BURMA ADVOCACY AND RESOURCE CENTER-3078917ET	
55	Award Number*	309-PFEH-0052-3078917ET	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *	\$198,000.00	
58	Award Date *	11/18/2020	
59	Period of Performance Start Date *	11/19/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	2309 Euclid Ave	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Des Moines	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50310-5703	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	3	
70	Award Description *	Funding is supporting the creation and expansion of short-term learn and learn training programs resulting in industry-recognized credentials by providing grants for Expand opportunities for Iowans whose employment has been affected or eliminated because of the Coronavirus pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAEH - Earn and Learn Grants	\$00	\$198,000.00	\$00	\$198,000.00
Total		\$00	\$198,000.00	\$00	\$198,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAEH - Earn and Learn Grants	11/19/2020	11/19/2020	\$198,000.00	Items Not Listed Above	Vocational Training
Total:					\$198,000.00	

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:					\$00	

Sub Screen: Award: 269-0043-009Q-3079062ET

54	Sub-Recipient Organization (Awardee)*	ETHNIC MINORITIES OF BURMA ADVOCACY AND-3079062ET
55	Award Number*	269-0043-009Q-3079062ET
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$198,000.00
58	Award Date *	10/05/2020
59	Period of Performance Start Date *	11/02/2020
60	Period of Performance End Date *	11/19/2020
61	Primary Place of Performance Address Line 1 *	2309 Euclid Ave
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Des Moines
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50310-5703
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	To develop and maintain a COVID-19 Crisis Response Helpline and Virtual Access Center to provide accurate and timely information statewide about the coronavirus from credible sources in languages spoken by refugee and immigrant populations in Iowa. To support the placement of Refugee RISE AmeriCorps members in communities and within organizations to focus on COVID-19 response and recovery activities.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0379 - Small Business Relief Grants	\$00	\$198,000.00	\$00	\$198,000.00
Total		\$00	\$198,000.00	\$00	\$198,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0379 - Small Business Relief Grants	11/19/2020 11/19/2020	\$198,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$198,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00		
Total:			\$00			

Sub Screen: Award: 269-0049-010F-3081450SE

54	Sub-Recipient Organization (Awardee)*	SELECT SPECIALTY HOSPITAL DES MOINES INC-3081450SE	
55	Award Number*	269-0049-010F-3081450SE	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$137,618.06
58	Award Date *	11/22/2020	
59	Period of Performance Start Date *	11/24/2020	
60	Period of Performance End Date *	11/24/2020	
61	Primary Place of Performance Address Line 1 *	4714 Gettysburg Rd	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Mechanicsburg	
65	Primary Place of Performance State Code *	PA	
66	Primary Place of Performance Zip+4 *	17055-4325	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	10	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$137,618.06	\$00	\$137,618.06
Total		\$00	\$137,618.06	\$00	\$137,618.06

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020	11/24/2020	\$137,618.06	Public Health Expenses	
Total:						\$137,618.06

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 21-RFRRP-148-181

54	Sub-Recipient Organization (Awardee)*	HEARTLAND COOP-3082491HE
55	Award Number*	21-RFRRP-148-181
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$1,020,000.00
58	Award Date *	10/25/2020
59	Period of Performance Start Date *	11/05/2020
60	Period of Performance End Date *	12/30/2020
61	Primary Place of Performance Address Line 1 *	2829 Westown Pkwy
62	Primary Place of Performance Address Line 2	STE 350
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	West Des Moines
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50266-1314
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	For the construction, installation, upgrade, and retrofit of equipment associated with the sale of renewable fuels to expand markets disrupted by COVID-19.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	\$00	\$1,020,000.00	\$00	\$1,020,000.00
Total		\$00	\$1,020,000.00	\$00	\$1,020,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	11/05/2020 11/05/2020	\$1,020,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$1,020,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0047-010D-3083965MI

54	Sub-Recipient Organization (Awardee)*	MILLS COUNTY FAIR ASSOCIATION-3083965MI
55	Award Number*	269-0047-010D-3083965MI
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$50,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 208
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Glenwood
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51534-0208
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 269-0049-010F-3084564TR

54	Sub-Recipient Organization (Awardee)*	TRINITY REGIONAL MEDICAL CENTER-3084564TR
55	Award Number*	269-0049-010F-3084564TR
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$217,944.12
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	802 Kenyon Rd
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Fort Dodge
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50501-5740
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$217,944.12	\$00	\$217,944.12
Total		\$00	\$217,944.12	\$00	\$217,944.12

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$217,944.12	Public Health Expenses	
Total:					\$217,944.12

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0049-010F-3085840GR

54	Sub-Recipient Organization (Awardee)*	GRINNELL REGIONAL MEDICAL CENTER-3085840GR
55	Award Number*	269-0049-010F-3085840GR
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$75,300.45
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	210 4th Ave W
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Grinnell
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50112-1833
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$75,300.45	\$00	\$75,300.45
Total		\$00	\$75,300.45	\$00	\$75,300.45

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$75,300.45	Public Health Expenses	
Total:					\$75,300.45

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0047-010D-3087542BO

54	Sub-Recipient Organization (Awardee)*	BOONE COUNTY AGRICULTURAL ASSOCIATION-3087542BO
55	Award Number*	269-0047-010D-3087542BO
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$75,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	1601 Industrial Park Rd
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Boone
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50036-3007
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$75,000.00	\$00	\$75,000.00
Total		\$00	\$75,000.00	\$00	\$75,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$75,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$75,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFEH-0052-3087979

54	Sub-Recipient Organization (Awardee)*	PLUMBERS AND STEAMFITTERS EDUCATION FUND-3087979PL
55	Award Number*	309-PFEH-0052-3087979
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$249,052.00
58	Award Date *	11/18/2020
59	Period of Performance Start Date *	11/19/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	2501 Bell Ave
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Des Moines
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50321-1118
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	Funding is supporting the creation and expansion of short-term learn and learn training programs resulting in industry-recognized credentials by providing grants for Expand opportunities for Iowans whose employment has been affected or eliminated because of the Coronavirus pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAEH - Earn and Learn Grants	\$00	\$249,052.00	\$00	\$249,052.00
Total		\$00	\$249,052.00	\$00	\$249,052.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAEH - Earn and Learn Grants	11/19/2020 11/19/2020	\$249,052.00	Items Not Listed Above	Vocational Training
Total:					\$249,052.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 309-PFEH-0052-3088226

54	Sub-Recipient Organization (Awardee)*	LOCAL 263 CEDAR RAPIDS SHEET METAL WORKERS-3088226LO	
55	Award Number*	309-PFEH-0052-3088226	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$246,105.00
58	Award Date *	11/19/2020	
59	Period of Performance Start Date *	11/20/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	500 66th Ave SW # 3	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Cedar Rapids	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52404-4764	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	1	
70	Award Description *	Funding is supporting the creation and expansion of short-term learn and learn training programs resulting in industry-recognized credentials by providing grants for Expand opportunities for Iowans whose employment has been affected or eliminated because of the Coronavirus pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAEH - Earn and Learn Grants	\$00	\$246,105.00	\$00	\$246,105.00
Total		\$00	\$246,105.00	\$00	\$246,105.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAEH - Earn and Learn Grants	11/20/2020 11/20/2020	\$246,105.00	Items Not Listed Above	Vocational Training
Total:					\$246,105.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
Total:						\$00

Sub Screen: Award: 269-0043-009Q-3088401IN

54	Sub-Recipient Organization (Awardee)*	INTERCULTURAL CENTER OF IOWA-3088401IN	
55	Award Number*	269-0043-009Q-3088401IN	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$150,000.00
58	Award Date *	10/05/2020	
59	Period of Performance Start Date *	11/02/2020	
60	Period of Performance End Date *	11/02/2020	
61	Primary Place of Performance Address Line 1 *	4338 16th Ave SW	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Cedar Rapids	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52404-1245	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	1	
70	Award Description *	Develop and maintain COVID-19 recovery and response resources that can be used to strengthen and support eth Limited English Proficiency communities, their employers, and other stakeholders.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0379 - Small Business Relief Grants	\$00	\$150,000.00	\$00	\$150,000.00
Total		\$00	\$150,000.00	\$00	\$150,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0379 - Small Business Relief Grants	11/02/2020	11/02/2020	\$150,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:						\$150,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 269-0047-010D-3091195WR

54	Sub-Recipient Organization (Awardee)*	WRIGHT COUNTY DISTRICT JUNIOR FAIR-3091195WR
55	Award Number*	269-0047-010D-3091195WR
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$50,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 125
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Eagle Grove
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50533-0125
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 309-PFEH-0052-3091946

54	Sub-Recipient Organization (Awardee)*	NORTHEAST IOWA IRONWORKERS LOCAL 89 JATC-3091946NO	
55	Award Number*	309-PFEH-0052-3091946	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$189,063.89
58	Award Date *	11/18/2020	
59	Period of Performance Start Date *	11/19/2020	
60	Period of Performance End Date *	09/30/2021	
61	Primary Place of Performance Address Line 1 *	1112 29th Ave SW	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Cedar Rapids	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52404-3409	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	1	
70	Award Description *	Funding is supporting the creation and expansion of short-term learn and learn training programs resulting in industry-recognized credentials by providing grants for Expand opportunities for Iowans whose employment has been affected or eliminated because of the Coronavirus pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAEH - Earn and Learn Grants	\$-1,636.11	\$189,063.89	\$-1,636.11	\$189,063.89
Total		\$-1,636.11	\$189,063.89	\$-1,636.11	\$189,063.89

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAEH - Earn and Learn Grants	11/19/2020 11/19/2020	\$190,700.00	Items Not Listed Above	Vocational Training
Total:					\$190,700.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	IA-309-AAEH - Earn and Learn Grants	07/01/2021 09/30/2021	\$-1,636.11	Items Not Listed Above	Vocational Training	
Total:						\$-1,636.11

Sub Screen: Award: 269-0049-010F-3092026ME

54	Sub-Recipient Organization (Awardee)*	MERCY HOSPITAL-3092026ME
55	Award Number*	269-0049-010F-3092026ME
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$495,274.25
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	500 E Market St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Iowa City
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52245-2633
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$495,274.25	\$00	\$495,274.25
Total		\$00	\$495,274.25	\$00	\$495,274.25

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$495,274.25	Public Health Expenses	
Total:					\$495,274.25

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 309-PFEH-0052-3092675

54	Sub-Recipient Organization (Awardee)*	LOCAL UNION NO 125 JATC FUND-3092675LO
55	Award Number*	309-PFEH-0052-3092675
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$104,972.00
58	Award Date *	11/18/2020
59	Period of Performance Start Date *	11/19/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	5101 J St SW
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Cedar Rapids
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52404-4914
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	Funding is supporting the creation and expansion of short-term learn and learn training programs resulting in industry-recognized credentials by providing grants for Expand opportunities for Iowans whose employment has been affected or eliminated because of the Coronavirus pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAEH - Earn and Learn Grants	\$00	\$104,972.00	\$00	\$104,972.00
Total		\$00	\$104,972.00	\$00	\$104,972.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAEH - Earn and Learn Grants	11/19/2020 11/19/2020	\$104,972.00	Items Not Listed Above	Vocational Training
Total:					\$104,972.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 309-PFEH-0052-3094486

54	Sub-Recipient Organization (Awardee)*	TFJSC LLC-3094486TF	
55	Award Number*	309-PFEH-0052-3094486	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$250,000.00
58	Award Date *	11/18/2020	
59	Period of Performance Start Date *	11/19/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	3050 Wagner Rd	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Waterloo	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50703-9604	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	1	
70	Award Description *	Funding is supporting the creation and expansion of short-term learn and learn training programs resulting in industry-recognized credentials by providing grants for Expand opportunities for Iowans whose employment has been affected or eliminated because of the Coronavirus pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAEH - Earn and Learn Grants	\$00	\$250,000.00	\$00	\$250,000.00
Total		\$00	\$250,000.00	\$00	\$250,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAEH - Earn and Learn Grants	11/19/2020 11/19/2020	\$250,000.00	Items Not Listed Above	Vocational Training
Total:					\$250,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFEH-0052-3094669

54	Sub-Recipient Organization (Awardee)*	J W BELL LLC-3094669JW
55	Award Number*	309-PFEH-0052-3094669
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$66,150.00
58	Award Date *	11/18/2020
59	Period of Performance Start Date *	11/19/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	PO BOX 727
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Cedar Rapids
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52406-0727
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	Funding is supporting the creation and expansion of short-term learn and learn training programs resulting in industry-recognized credentials by providing grants for Expand opportunities for Iowans whose employment has been affected or eliminated because of the Coronavirus pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAEH - Earn and Learn Grants	\$00	\$66,150.00	\$00	\$66,150.00
Total		\$00	\$66,150.00	\$00	\$66,150.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAEH - Earn and Learn Grants	11/19/2020 11/19/2020	\$66,150.00	Items Not Listed Above	Vocational Training
Total:					\$66,150.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0043-009Q-3100551CA

54	Sub-Recipient Organization (Awardee)*	CATHERINE MCAULEY CENTER INC-3100551CA
55	Award Number*	269-0043-009Q-3100551CA
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$54,000.00
58	Award Date *	10/07/2020
59	Period of Performance Start Date *	11/02/2020
60	Period of Performance End Date *	11/02/2020
61	Primary Place of Performance Address Line 1 *	1220 5th Ave SE
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Cedar Rapids
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52403-4049
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and supports, and/or to reopen the nonprofit following the COVID-19 pandemic. This grant was targeted to shelters.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0379 - Small Business Relief Grants	\$00	\$54,000.00	\$00	\$54,000.00
Total		\$00	\$54,000.00	\$00	\$54,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0379 - Small Business Relief Grants	11/02/2020 11/02/2020	\$54,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$54,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A		75 B	75 C	75 D	75 E
	Project*		Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
						Delete
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 269-0049-010F-3100894JE

54	Sub-Recipient Organization (Awardee)*	JEFFERSON COUNTY HOSPITAL-3100894JE
55	Award Number*	269-0049-010F-3100894JE
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$83,843.99
58	Award Date *	11/22/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	11/24/2020
61	Primary Place of Performance Address Line 1 *	2000 S Main St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Fairfield
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52556-9572
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$83,843.99	\$00	\$83,843.99
Total		\$00	\$83,843.99	\$00	\$83,843.99

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020 11/24/2020	\$83,843.99	Public Health Expenses	
Total:					\$83,843.99

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0043-009Q-3101306DU

54	Sub-Recipient Organization (Awardee)*	DUBUQUE DREAM CENTER-3101306DU
55	Award Number*	269-0043-009Q-3101306DU
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$50,000.00
58	Award Date *	11/24/2020
59	Period of Performance Start Date *	12/03/2020
60	Period of Performance End Date *	12/03/2020
61	Primary Place of Performance Address Line 1 *	1600 White St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Dubuque
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52001-3617
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	To support organizations providing volunteer infrastructure including Volunteer Center, Mentoring, and RSVP programs, as well as community-based organizations with established trust and history of serving communities of color.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0379 - Small Business Relief Grants	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0379 - Small Business Relief Grants	12/03/2020 12/03/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 21-RFRRP-239-240

54	Sub-Recipient Organization (Awardee)*	SUNDSTOP II LLC-3102072SU
55	Award Number*	21-RFRRP-239-240
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$60,000.00
58	Award Date *	10/15/2020
59	Period of Performance Start Date *	10/28/2020
60	Period of Performance End Date *	12/30/2020
61	Primary Place of Performance Address Line 1 *	17752 25th St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Mechanicsville
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52306-8051
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	For the construction, installation, upgrade, and retrofit of equipment associated with the sale of renewable fuels to expand markets disrupted by COVID-19.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	\$00	\$60,000.00	\$00	\$60,000.00
Total		\$00	\$60,000.00	\$00	\$60,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	10/28/2020 10/28/2020	\$60,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$60,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0047-010D-3102728GR

54	Sub-Recipient Organization (Awardee)*	GREENE COUNTY FAIR ASSOCIATION-3102728GR	
55	Award Number*	269-0047-010D-3102728GR	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$50,000.00
58	Award Date *	11/29/2020	
59	Period of Performance Start Date *	12/01/2020	
60	Period of Performance End Date *	12/01/2020	
61	Primary Place of Performance Address Line 1 *	650 190th St	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Scranton	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	51462-7512	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *		
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020	12/01/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:						\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 269-0043-009Q-3104387SA

54	Sub-Recipient Organization (Awardee)*	SALVATION ARMY-3104387SA
55	Award Number*	269-0043-009Q-3104387SA
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$147,300.00
58	Award Date *	10/12/2020
59	Period of Performance Start Date *	11/02/2020
60	Period of Performance End Date *	11/02/2020
61	Primary Place of Performance Address Line 1 *	100 Kirkwood Blvd
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Davenport
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52803-4511
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and supports, and/or to reopen the nonprofit following the COVID-19 pandemic. This grant was targeted to shelters.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0379 - Small Business Relief Grants	\$00	\$147,300.00	\$00	\$147,300.00
Total		\$00	\$147,300.00	\$00	\$147,300.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0379 - Small Business Relief Grants	11/02/2020 11/02/2020	\$147,300.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$147,300.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes				
74	Non-Compliance Explanation							
	75 A		75 B		75 C	75 D	75 E	
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0				\$00			
Total:					\$00			

Sub Screen: Award: 21-RFRRP-034-036

54	Sub-Recipient Organization (Awardee)*	RAINBO OIL COMPANY-3104650RA	
55	Award Number*	21-RFRRP-034-036	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$76,591.00
58	Award Date *	10/25/2020	
59	Period of Performance Start Date *	11/05/2020	
60	Period of Performance End Date *	12/30/2020	
61	Primary Place of Performance Address Line 1 *	PO BOX 768	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Dubuque	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52004-0768	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	1	
70	Award Description *	For the construction, installation, upgrade, and retrofit of equipment associated with the sale of renewable fuels to expand markets disrupted by COVID-19.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	\$00	\$76,591.00	\$00	\$76,591.00
Total		\$00	\$76,591.00	\$00	\$76,591.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category* Category Description
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	11/05/2020	11/05/2020	\$76,591.00	Economic Support (Other than Small Business, Housing, and Food Assistance)
Total:					\$76,591.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description Delete
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 21-RFRRP-196-215

54	Sub-Recipient Organization (Awardee)*	GROWMARK INC-3105752GR
55	Award Number*	21-RFRRP-196-215
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$630,000.00
58	Award Date *	10/11/2020
59	Period of Performance Start Date *	10/28/2020
60	Period of Performance End Date *	12/30/2020
61	Primary Place of Performance Address Line 1 *	1701 Towanda Ave
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Bloomington
65	Primary Place of Performance State Code *	IL
66	Primary Place of Performance Zip+4 *	61701-2057
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	13
70	Award Description *	For the construction, installation, upgrade, and retrofit of equipment associated with the sale of renewable fuels to expand markets disrupted by COVID-19.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	\$00	\$630,000.00	\$00	\$630,000.00
Total		\$00	\$630,000.00	\$00	\$630,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	10/28/2020 10/28/2020	\$630,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$630,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes				
74	Non-Compliance Explanation							
	75 A		75 B		75 C	75 D	75 E	
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0				\$00			
Total:				\$00				

Sub Screen: Award: 269-0047-010D-3106414NA

54	Sub-Recipient Organization (Awardee)*	NATIONAL CATTLE CONGRESS-3106414NA
55	Award Number*	269-0047-010D-3106414NA
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$100,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/04/2020
61	Primary Place of Performance Address Line 1 *	257 Ansborough Ave
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Waterloo
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50701-2133
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$100,000.00	\$00	\$100,000.00
Total		\$00	\$100,000.00	\$00	\$100,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/04/2020	\$100,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$100,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFAV-0052-3106449

54	Sub-Recipient Organization (Awardee)*	The CEU Authority-3106449CE	
55	Award Number*	309-PFAV-0052-3106449	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$50,000.00
58	Award Date *	11/15/2020	
59	Period of Performance Start Date *	11/16/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	5644 NE 17th St	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Des Moines	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50313-1616	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *		
70	Award Description *	Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	11/16/2020	11/16/2020	\$50,000.00	Items Not Listed Above	Vocational Training
Total:						\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 309-PFEH-0052-3106449

54	Sub-Recipient Organization (Awardee)*	The CEU Authority-3106449CE
55	Award Number*	309-PFEH-0052-3106449
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$90,200.00
58	Award Date *	11/19/2020
59	Period of Performance Start Date *	11/20/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	5644 NE 17th St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Des Moines
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50313-1616
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	Funding is supporting the creation and expansion of short-term learn and learn training programs resulting in industry-recognized credentials by providing grants for Expand opportunities for Iowans whose employment has been affected or eliminated because of the Coronavirus pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAEH - Earn and Learn Grants	\$00	\$90,200.00	\$00	\$90,200.00
Total		\$00	\$90,200.00	\$00	\$90,200.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAEH - Earn and Learn Grants	11/20/2020 11/20/2020	\$90,200.00	Items Not Listed Above	Vocational Training
Total:					\$90,200.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFEH-0052-3107534

54	Sub-Recipient Organization (Awardee)*	GERTEN HOLLOW INC-3107534GE	
55	Award Number*	309-PFEH-0052-3107534	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$79,750.00
58	Award Date *	11/23/2020	
59	Period of Performance Start Date *	11/24/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	1301 Normal St	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Woodbine	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	51579-1133	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	4	
70	Award Description *	Funding is supporting the creation and expansion of short-term learn and learn training programs resulting in industry-recognized credentials by providing grants for Expand opportunities for Iowans whose employment has been affected or eliminated because of the Coronavirus pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAEH - Earn and Learn Grants	\$00	\$79,750.00	\$00	\$79,750.00
Total		\$00	\$79,750.00	\$00	\$79,750.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAEH - Earn and Learn Grants	11/24/2020 11/24/2020	\$79,750.00	Items Not Listed Above	Vocational Training
Total:					\$79,750.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0049-010F-3108202UN

54	Sub-Recipient Organization (Awardee)*	UNITY POINT HEALTH MARSHALLTOWN-3108202UN	
55	Award Number*	269-0049-010F-3108202UN	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$61,396.25
58	Award Date *	11/22/2020	
59	Period of Performance Start Date *	11/24/2020	
60	Period of Performance End Date *	11/24/2020	
61	Primary Place of Performance Address Line 1 *	PO BOX 809255	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Chicago	
65	Primary Place of Performance State Code *	IL	
66	Primary Place of Performance Zip+4 *	60680-9255	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	7	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	\$00	\$61,396.25	\$00	\$61,396.25
Total		\$00	\$61,396.25	\$00	\$61,396.25

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0049 - Iowa Hospital COVID-19 Relief Program	11/24/2020	11/24/2020	\$61,396.25	Public Health Expenses	
Total:						\$61,396.25

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 269-0045-009X-3111756EL

54	Sub-Recipient Organization (Awardee)*	ELITE OCTANE LLC-3111756EL	
55	Award Number*	269-0045-009X-3111756EL	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$750,000.00
58	Award Date *	10/04/2020	
59	Period of Performance Start Date *	10/19/2020	
60	Period of Performance End Date *	10/19/2020	
61	Primary Place of Performance Address Line 1 *	60502 Glacier Rd	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Atlantic	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50022-8275	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	3	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0045 - State Biofuel Grant Program	\$00	\$750,000.00	\$00	\$750,000.00
Total		\$00	\$750,000.00	\$00	\$750,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0045 - State Biofuel Grant Program	10/19/2020	10/19/2020	\$750,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:						\$750,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 309-PFEH-0052-3113628

54	Sub-Recipient Organization (Awardee)*	A1 MORRIS HEATING & COOLING INC-3113628A1
55	Award Number*	309-PFEH-0052-3113628
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$137,170.00
58	Award Date *	11/23/2020
59	Period of Performance Start Date *	11/24/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	2238 W River Dr
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Davenport
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52802-2833
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	Funding is supporting the creation and expansion of short-term learn and learn training programs resulting in industry-recognized credentials by providing grants for Expand opportunities for Iowans whose employment has been affected or eliminated because of the Coronavirus pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAEH - Earn and Learn Grants	\$00	\$137,170.00	\$00	\$137,170.00
Total		\$00	\$137,170.00	\$00	\$137,170.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAEH - Earn and Learn Grants	11/24/2020 11/24/2020	\$137,170.00	Items Not Listed Above	Vocational Training
Total:					\$137,170.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0047-010D-3115365WY

54	Sub-Recipient Organization (Awardee)*	WYOMING FAIR ASSOCIATION-3115365WY
55	Award Number*	269-0047-010D-3115365WY
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$50,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 436
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Wyoming
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52362-0436
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$50,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 21-RFRRP-001-007

54	Sub-Recipient Organization (Awardee)*	KIMMES ENTERPRISES LLC-3123758KI
55	Award Number*	21-RFRRP-001-007
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$209,930.00
58	Award Date *	10/08/2020
59	Period of Performance Start Date *	10/22/2020
60	Period of Performance End Date *	12/30/2020
61	Primary Place of Performance Address Line 1 *	414 W 7th St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Carroll
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	51401-2373
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	For the construction, installation, upgrade, and retrofit of equipment associated with the sale of renewable fuels to expand markets disrupted by COVID-19.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	\$00	\$209,930.00	\$00	\$209,930.00
Total		\$00	\$209,930.00	\$00	\$209,930.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-009-1136 - Renewable Fuel Retail Recovery Program	10/22/2020 10/22/2020	\$209,930.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$209,930.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A		75 B	75 C	75 D	75 E
	Project*		Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description>Delete
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 269-0047-010D-3166711MA

54	Sub-Recipient Organization (Awardee)*	MARION CO FAIR BOARD-3166711MA
55	Award Number*	269-0047-010D-3166711MA
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$75,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 347
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Knoxville
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50138-0347
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$75,000.00	\$00	\$75,000.00
Total		\$00	\$75,000.00	\$00	\$75,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$75,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$75,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFEH-0052-3167825

54	Sub-Recipient Organization (Awardee)*	CHILDREN'S JUNGLE THE-3167825CH
55	Award Number*	309-PFEH-0052-3167825
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$203,258.39
58	Award Date *	11/18/2020
59	Period of Performance Start Date *	11/19/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	828 W Summit St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Winterset
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50273-2206
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	Funding is supporting the creation and expansion of short-term learn and learn training programs resulting in industry-recognized credentials by providing grants for Expand opportunities for Iowans whose employment has been affected or eliminated because of the Coronavirus pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAEH - Earn and Learn Grants	\$00	\$203,258.39	\$00	\$203,258.39
Total		\$00	\$203,258.39	\$00	\$203,258.39

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAEH - Earn and Learn Grants	11/19/2020 11/19/2020	\$211,200.00	Items Not Listed Above	Vocational Training
Line 2	IA-309-AAEH - Earn and Learn Grants	04/01/2021 06/30/2021	\$-7,941.61	Items Not Listed Above	Vocational Training
Total:					\$203,258.39

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFEH-0052-3179662

54	Sub-Recipient Organization (Awardee)*	WELL RESOURCE CENTER THE-3179662WE	
55	Award Number*	309-PFEH-0052-3179662	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$140,184.00
58	Award Date *	11/18/2020	
59	Period of Performance Start Date *	11/19/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	419 E Oskaloosa St	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Pella	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50219-2202	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	2	
70	Award Description *	Funding is supporting the creation and expansion of short-term learn and learn training programs resulting in industry-recognized credentials by providing grants for Expand opportunities for Iowans whose employment has been affected or eliminated because of the Coronavirus pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAEH - Earn and Learn Grants	\$00	\$140,184.00	\$00	\$140,184.00
Total		\$00	\$140,184.00	\$00	\$140,184.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAEH - Earn and Learn Grants	11/19/2020 11/19/2020	\$140,184.00	Items Not Listed Above	Vocational Training
Total:					\$140,184.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
Total:						\$00

Sub Screen: Award: 309-PFAV-0052-3179711

54	Sub-Recipient Organization (Awardee)*	J&R EXCAVATING LLC-3179711JR
55	Award Number*	309-PFAV-0052-3179711
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$50,000.00
58	Award Date *	11/15/2020
59	Period of Performance Start Date *	11/16/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	5644 NE 17th St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Des Moines
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50313-1616
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	3
70	Award Description *	Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	11/16/2020 11/16/2020	\$50,000.00	Items Not Listed Above	Vocational Training
Total:					\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00		
Total:			\$00			

Sub Screen: Award: 309-PFEH-0052-3179964

54	Sub-Recipient Organization (Awardee)*	CHRISTIAN RETIREMENT SERVICES INC-3179964CH	
55	Award Number*	309-PFEH-0052-3179964	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$165,000.00
58	Award Date *	11/18/2020	
59	Period of Performance Start Date *	11/19/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	1 Oaknoll Ct	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Iowa City	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52246-5250	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	2	
70	Award Description *	Funding is supporting the creation and expansion of short-term learn and learn training programs resulting in industry-recognized credentials by providing grants for Expand opportunities for Iowans whose employment has been affected or eliminated because of the Coronavirus pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAEH - Earn and Learn Grants	\$00	\$165,000.00	\$00	\$165,000.00
Total		\$00	\$165,000.00	\$00	\$165,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAEH - Earn and Learn Grants	11/19/2020 11/19/2020	\$165,000.00	Items Not Listed Above	Vocational Training
Total:					\$165,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFAV-0052-3180474

54	Sub-Recipient Organization (Awardee)*	WESTERN HOME SERVICES INC-3180474WE	
55	Award Number*	309-PFAV-0052-3180474	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$232,536.45
58	Award Date *	11/19/2020	
59	Period of Performance Start Date *	11/20/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	5307 Caraway Ln	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Cedar Falls	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50613-8172	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	1	
70	Award Description *	Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$00	\$232,536.45	\$00	\$232,536.45
Total		\$00	\$232,536.45	\$00	\$232,536.45

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	11/20/2020	11/20/2020	\$234,150.00	Items Not Listed Above	Vocational Training
Line 2	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	04/01/2021	06/30/2021	\$-1,613.55	Items Not Listed Above	Vocational Training
Total:						\$232,536.45

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 269-0047-010D-3182466FR

54	Sub-Recipient Organization (Awardee)*	FRANKLIN COUNTY AGRICULTURE AND FAIR ASSOC-3182466FR	
55	Award Number*	269-0047-010D-3182466FR	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$75,000.00
58	Award Date *	11/29/2020	
59	Period of Performance Start Date *	12/01/2020	
60	Period of Performance End Date *	12/01/2020	
61	Primary Place of Performance Address Line 1 *	1008 CENTRAL AVE WEST	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	HAMPTON	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	50441	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *		
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$75,000.00	\$00	\$75,000.00
Total		\$00	\$75,000.00	\$00	\$75,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$75,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$75,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*	Yes				
74	Non-Compliance Explanation					
	75 A	75 B	75 C	75 D	75 E	
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0		\$00			
Total:						\$00

Sub Screen: Award: 309-PFEH-0052-3182513

54	Sub-Recipient Organization (Awardee)*	ATC INC-3182513AT	
55	Award Number*	309-PFEH-0052-3182513	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$243,600.00
58	Award Date *	11/17/2020	
59	Period of Performance Start Date *	11/18/2020	
60	Period of Performance End Date *	06/30/2021	
61	Primary Place of Performance Address Line 1 *	941 66th Ave SW	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Cedar Rapids	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52404-4710	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	1	
70	Award Description *	Funding is supporting the creation and expansion of short-term learn and learn training programs resulting in industry-recognized credentials by providing grants for Expand opportunities for Iowans whose employment has been affected or eliminated because of the Coronavirus pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAEH - Earn and Learn Grants	\$00	\$243,600.00	\$00	\$243,600.00
Total		\$00	\$243,600.00	\$00	\$243,600.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAEH - Earn and Learn Grants	11/18/2020 11/18/2020	\$243,600.00	Items Not Listed Above	Vocational Training
Total:					\$243,600.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes		
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:				\$00		

Sub Screen: Award: 269-0047-010D-3182679MI

54	Sub-Recipient Organization (Awardee)*	MISSISSIPPI VALLEY FAIR INC-3182679MI	
55	Award Number*	269-0047-010D-3182679MI	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$100,000.00
58	Award Date *	11/29/2020	
59	Period of Performance Start Date *	12/01/2020	
60	Period of Performance End Date *	12/04/2020	
61	Primary Place of Performance Address Line 1 *	2815 W Locust St	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Davenport	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	52804-3343	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *	2	
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$100,000.00	\$00	\$100,000.00
Total		\$00	\$100,000.00	\$00	\$100,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020	12/04/2020	\$100,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:						\$100,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 269-0047-010D-3182681CE

54	Sub-Recipient Organization (Awardee)*	CEDAR COUNTY FAIR ASSOCIATION-3182681CE
55	Award Number*	269-0047-010D-3182681CE
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$75,000.00
58	Award Date *	11/29/2020
59	Period of Performance Start Date *	12/01/2020
60	Period of Performance End Date *	12/01/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 324
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Tipton
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52772-0324
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	2
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0047 - Iowa County Fair Relief Program	\$00	\$75,000.00	\$00	\$75,000.00
Total		\$00	\$75,000.00	\$00	\$75,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0047 - Iowa County Fair Relief Program	12/01/2020 12/01/2020	\$75,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$75,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFEH-0052-3183166

54	Sub-Recipient Organization (Awardee)*	CEDAR RAPIDS TANK WASH INC-3183166CE
55	Award Number*	309-PFEH-0052-3183166
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$120,226.06
58	Award Date *	11/17/2020
59	Period of Performance Start Date *	11/18/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	1100 2nd Ave NE
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Independence
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50644-1227
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	Funding is supporting the creation and expansion of short-term learn and learn training programs resulting in industry-recognized credentials by providing grants for Expand opportunities for Iowans whose employment has been affected or eliminated because of the Coronavirus pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAEH - Earn and Learn Grants	\$00	\$120,226.06	\$00	\$120,226.06
Total		\$00	\$120,226.06	\$00	\$120,226.06

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAEH - Earn and Learn Grants	11/18/2020 11/18/2020	\$120,226.06	Items Not Listed Above	Vocational Training
Total:					\$120,226.06

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFAV-0052-3183189HO

54	Sub-Recipient Organization (Awardee)*	HOMES FOR IOWA INC-3183189HO
55	Award Number*	309-PFAV-0052-3183189HO
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$50,000.00
58	Award Date *	11/17/2020
59	Period of Performance Start Date *	11/18/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	406 N High St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Anamosa
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52205-1157
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	Funding is to increase the number of Registered Apprenticeship Training Programs in Iowa high schools, non-profits, small businesses, postsecondary institutions and in healthcare settings. Registered Apprenticeship programs provide Iowans with opportunities to learn and learn while obtaining nationally recognized credentials. These programs are registered through the United States Department of Labor.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	\$00	\$50,000.00	\$00	\$50,000.00
Total		\$00	\$50,000.00	\$00	\$50,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAAV - Registered Apprenticeship Incentive Grant Program	11/18/2020 11/18/2020	\$50,000.00	Items Not Listed Above	Vocational Training
Total:					\$50,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 309-PFEH-0052-3183189

54	Sub-Recipient Organization (Awardee)*	HOMES FOR IOWA INC-3183189HO
55	Award Number*	309-PFEH-0052-3183189
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$100,000.00
58	Award Date *	11/18/2020
59	Period of Performance Start Date *	11/19/2020
60	Period of Performance End Date *	06/30/2021
61	Primary Place of Performance Address Line 1 *	406 N High St
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Anamosa
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52205-1157
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	Funding is supporting the creation and expansion of short-term learn and learn training programs resulting in industry-recognized credentials by providing grants for Expand opportunities for Iowans whose employment has been affected or eliminated because of the Coronavirus pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-309-AAEH - Earn and Learn Grants	\$00	\$100,000.00	\$00	\$100,000.00
Total		\$00	\$100,000.00	\$00	\$100,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-309-AAEH - Earn and Learn Grants	11/19/2020 11/19/2020	\$100,000.00	Items Not Listed Above	Vocational Training
Total:					\$100,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0045-009X-3183307BI

54	Sub-Recipient Organization (Awardee)*	BIG RIVER UNITED ENERGY LLC-3183307BI
55	Award Number*	269-0045-009X-3183307BI
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$750,000.00
58	Award Date *	10/04/2020
59	Period of Performance Start Date *	10/15/2020
60	Period of Performance End Date *	10/15/2020
61	Primary Place of Performance Address Line 1 *	3294 Vine Rd
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Dyersville
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	52040-8714
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	1
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0045 - State Biofuel Grant Program	\$00	\$750,000.00	\$00	\$750,000.00
Total		\$00	\$750,000.00	\$00	\$750,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0045 - State Biofuel Grant Program	10/15/2020 10/15/2020	\$750,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$750,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0045-009X-3183308CO

54	Sub-Recipient Organization (Awardee)*	CORN LP-3183308CO
55	Award Number*	269-0045-009X-3183308CO
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$403,700.00
58	Award Date *	10/04/2020
59	Period of Performance Start Date *	10/15/2020
60	Period of Performance End Date *	10/15/2020
61	Primary Place of Performance Address Line 1 *	PO BOX 280
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Goldfield
65	Primary Place of Performance State Code *	IA
66	Primary Place of Performance Zip+4 *	50542-0280
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0045 - State Biofuel Grant Program	\$00	\$403,700.00	\$00	\$403,700.00
Total		\$00	\$403,700.00	\$00	\$403,700.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0045 - State Biofuel Grant Program	10/15/2020 10/15/2020	\$403,700.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$403,700.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 269-0045-009X-3183309FH

54	Sub-Recipient Organization (Awardee)*	FHR ARTHUR LLC-3183309FH
55	Award Number*	269-0045-009X-3183309FH
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$750,000.00
58	Award Date *	10/04/2020
59	Period of Performance Start Date *	10/21/2020
60	Period of Performance End Date *	10/21/2020
61	Primary Place of Performance Address Line 1 *	4111 E 37th St N
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Wichita
65	Primary Place of Performance State Code *	KS
66	Primary Place of Performance Zip+4 *	67220-3203
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	4
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0045 - State Biofuel Grant Program	\$00	\$750,000.00	\$00	\$750,000.00
Total		\$00	\$750,000.00	\$00	\$750,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0045 - State Biofuel Grant Program	10/21/2020 10/21/2020	\$750,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$750,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes							
74	Non-Compliance Explanation										
	75 A		75 B		75 C		75 D		75 E		
	Project*		Expenditure Date Range*		Cost or Expenditure Amount*		Cost or Expenditure Category*		Category Description		Delete
Line 1	0				\$00						
Total:					\$00						

Sub Screen: Award: 269-0045-009X-3183314LO

54	Sub-Recipient Organization (Awardee)*	LOUIS DREYFUS COMPANY HOLDING INC-3183314LO	
55	Award Number*	269-0045-009X-3183314LO	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$582,989.00
58	Award Date *	10/04/2020	
59	Period of Performance Start Date *	10/15/2020	
60	Period of Performance End Date *	10/15/2020	
61	Primary Place of Performance Address Line 1 *	PO BOX 810	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Wilton	
65	Primary Place of Performance State Code *	CT	
66	Primary Place of Performance Zip+4 *	06897-0810	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *		
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0045 - State Biofuel Grant Program	\$00	\$582,989.00	\$00	\$582,989.00
Total		\$00	\$582,989.00	\$00	\$582,989.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0045 - State Biofuel Grant Program	10/15/2020	10/15/2020	\$582,989.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:						\$582,989.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00

Sub Screen: Award: 269-0045-009X-3183323PO

54	Sub-Recipient Organization (Awardee)*	POET HOLDING COMPANY LLC-3183323PO
55	Award Number*	269-0045-009X-3183323PO
56	Award Payment Method*	Lump Sum Payment(s)
57	Amount of Award *	\$750,000.00
58	Award Date *	10/04/2020
59	Period of Performance Start Date *	10/15/2020
60	Period of Performance End Date *	10/15/2020
61	Primary Place of Performance Address Line 1 *	4615 N Lewis Ave
62	Primary Place of Performance Address Line 2	
63	Primary Place of Performance Address Line 3	
64	Primary Place of Performance City Name *	Sioux Falls
65	Primary Place of Performance State Code *	SD
66	Primary Place of Performance Zip+4 *	57104-7116
67	Primary Place of Performance Country Name *	United States
68	Primary Place of Performance Country Code *	USA
69	Primary Place of Performance Congressional District *	0
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0045 - State Biofuel Grant Program	\$00	\$750,000.00	\$00	\$750,000.00
Total		\$00	\$750,000.00	\$00	\$750,000.00

Previous Expenditures (All previous quarters)

	72 A	72 B	72 C	72 D	72 E
	Project*	Expenditure Date Range*	Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0045 - State Biofuel Grant Program	10/15/2020 10/15/2020	\$750,000.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:					\$750,000.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*			Yes			
74	Non-Compliance Explanation						
	75 A	75 B		75 C	75 D	75 E	
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description	Delete
Line 1	0			\$00			
Total:				\$00			

Sub Screen: Award: 269-0045-009X-3183324SI

54	Sub-Recipient Organization (Awardee)*	SIOUXLAND ENERGY COOPERATIVE-3183324SI	
55	Award Number*	269-0045-009X-3183324SI	
56	Award Payment Method*	Lump Sum Payment(s)	
57	Amount of Award *		\$249,360.00
58	Award Date *	10/04/2020	
59	Period of Performance Start Date *	10/15/2020	
60	Period of Performance End Date *	10/15/2020	
61	Primary Place of Performance Address Line 1 *	3890 Garfield Ave	
62	Primary Place of Performance Address Line 2		
63	Primary Place of Performance Address Line 3		
64	Primary Place of Performance City Name *	Sioux Center	
65	Primary Place of Performance State Code *	IA	
66	Primary Place of Performance Zip+4 *	51250-7596	
67	Primary Place of Performance Country Name *	United States	
68	Primary Place of Performance Country Code *	USA	
69	Primary Place of Performance Congressional District *		
70	Award Description *	To provide short-term cash flow assistance to continue operations, provide increased services and support throughout the COVID-19 pandemic.	

Obligations

	71 A	71 B	71 C	71 D	71 E
	Project*	Current Quarter Obligation*	Cumulative Obligation*	Current Quarter Expenditure	Cumulative Expenditure
Line 1	IA-269-0045 - State Biofuel Grant Program	\$00	\$249,360.00	\$00	\$249,360.00
Total		\$00	\$249,360.00	\$00	\$249,360.00

Previous Expenditures (All previous quarters)

	72 A	72 B		72 C	72 D	72 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	IA-269-0045 - State Biofuel Grant Program	10/15/2020	10/15/2020	\$249,360.00	Economic Support (Other than Small Business, Housing, and Food Assistance)	
Total:						\$249,360.00

Current Quarter Expenditures

73	Is awardee complying with terms and conditions of the grant?*		Yes			
74	Non-Compliance Explanation					
	75 A	75 B		75 C	75 D	75 E
	Project*	Expenditure Date Range*		Cost or Expenditure Amount*	Cost or Expenditure Category*	Category Description
Line 1	0			\$00		
Total:						\$00